2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Apr 29, 2002 8:00 am Secretary of State **DOCUMENT # 745221** 1. Entity Name 04-29-2002 90074 048 ****61.25 TENNIS LODGES #1 CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address C/O WELLINGTON MANAGEMENT. INC. C/O WELLINGTON MANAGEMENT. INC. 12785-CIFOREST HILL BLVD 12785-C FOREST HILL BLVD. WELLINGTON FL 33414 WELLINGTON FL: 33414 US? 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1877098 Not Applicable Zip Country Zip Country \$8.75 Additional Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HEWSOME, JOHN WELLINGTON MANAGEMENT, INC. 12785-C FOREST HILL BLVD City Zip Code **WELLINGTON FL 33414** 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. High hard the said THE SEARCH SIGNATURE 5 DATE Signature, typed or printed name of registered agent and title if applicable $\frac{1}{2}(\frac{1}{2},$ (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. (10/6) Addition TITLE Change TITLE PD Delete William Greene NAME KEMPLIN, RAY NAME 4 Gneenway STREET ADDRESS STREET ADDRESS 11863 WIMBLEDON CIR UNIT 526 Roslyn, NY 11567 CITY-ST-7IP CITY-ST-ZIP WEST PALM BEACH FL 33414 Addition Change Delete TITLE TITLE Justus W. Reid NAME LAWSON, CHARLES NAME P.O. Drawer 2916 STREET ADDRESS STREET ADDRESS 1806 HWY 35 West Palm Beach, FL 32102 **يو. پا**وسوس CITY-ST-ZÎP CITY-ST-ZIP-OAK HURST NJ OT 155 ☐ Change ☐ Addition TITLE Delete ARMANTO, ROCKY NAME NAME STREET ADDRESS STREET ADDRESS 11863 WIMBLEDON CIR., #414 CITY-ST-ZIP CITY-ST-ZIP WELLINGTON FL 33414 Delete Change Addition TITLE TITLE NAME LAWSON, JUDITH NAME STREET ADDRESS STREET ADDRESS 15 WIPPOOR WILL RD CITY-ST-ZIP CITY-ST-ZIP AMAWALK NY 10501 ☐ Addition TITLE Change Tudor, Judith NAME NAME STREET ADDRESS STREET ADDRESS 880 DUVALL RD CITY-ST-ZIP CITY-ST-7IP **GEORGETOWN KY 40324** Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME MADORE, PAM STREET ADDRESS STREET ADDRESS 11863 WIMBLEDON CIR #410 CITY-ST-ZIP WEST PALM BEACH FL 33414 12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director; of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED