2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90408 044 ****61.25

DOCUMENT # 745221

1. Entity Name
TENNIS LODGES #1 CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
3461 B-FAIR LANE FARMS RD.
WELLINGTON, FL 33414 US

Mailing Address
3461 B-FAIR LANE FARMS RD.
WELLINGTON, FL 33414 US

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

04112006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-1877098 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NEWSOME, JOHN
3461-B FAIRLANE FARMS ROAD
WELLINGTON, FL 33414

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City | FL | Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD	☒ Delete	TITLE V/D	☐ Change ☒ Addition
NAME	KEMPLIN, RAY		NAME Lennon-Wood, Janet	
STREET ADDRESS	11863 WIMBLEDON CIR UNIT 526		STREET ADDRESS 11863 Wimbledon Cir Unit 504/505	
CITY-ST-ZIP	WEST PALM BEACH, FL 33414		CITY-ST-ZIP Wellington, FL 33414	
TITLE	T	☐ Delete	TITLE P/D	☒ Change ☐ Addition
NAME	HIGGINS, THOMAS		NAME	
STREET ADDRESS	8 RED OAK CT		STREET ADDRESS	
CITY-ST-ZIP	VOORHEES, NJ 08043		CITY-ST-ZIP	
TITLE	D	☒ Delete	TITLE T/D	☐ Change ☒ Addition
NAME	CORONITI, JOYCE		NAME Wolf, Meredith	
STREET ADDRESS	11863 WIMBLETON CIR, #542		STREET ADDRESS 11863 Wimbledon Cir Unit 538	
CITY-ST-ZIP	WELLINGTON, FL		CITY-ST-ZIP Wellington FL 33414	
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	TUDOR, JUDITH		NAME	
STREET ADDRESS	880 DUVALL RD		STREET ADDRESS	
CITY-ST-ZIP	GEORGETOWN, KY 40324		CITY-ST-ZIP	
TITLE	S	☒ Delete	TITLE S/D	☐ Change ☒ Addition
NAME	MADORE, PAM		NAME Greene, William	
STREET ADDRESS	11863 WIMBLEDON CIR #410		STREET ADDRESS 11863 Wimbledon Circle Unit 534	
CITY-ST-ZIP	WEST PALM BEACH, FL 33414		CITY-ST-ZIP Wellington, FL 33414	
TITLE	VP	☒ Delete	TITLE	☐ Change ☐ Addition
NAME	ARMENTO, ROCKY		NAME	
STREET ADDRESS	11863 WIMBLEDON 414		STREET ADDRESS	
CITY-ST-ZIP	WELLINGTON, FL 33414		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: _____ 4.11.06 (561) 753 4785
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #