

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709091

FILED
Jan 25, 2017
Secretary of State
CC5709064635**Entity Name:** UNITED STATES TENNIS ASSOCIATION-FLORIDA SECTION, INC.**Current Principal Place of Business:**1 DEUCE COURT
SUITE 100
DAYTONA BEACH, FL 32124**Current Mailing Address:**1 DEUCE COURT
SUITE 100
DAYTONA BEACH, FL 32124 US**FEI Number:** 23-7161642**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BOOTH, DOUG
1 DEUCE CT STE 100
DAYTONA BEACH, FL 32124 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT
Name	HOLLIS, ROBERT
Address	1202 LAKE EBERT DRIVE, SE
City-State-Zip:	WINTER HAVEN FL 33880

Title	PAST PRESIDENT
Name	HOROWITZ, NANCY
Address	11001 NW 18TH PLACE
City-State-Zip:	PEMBROKE PINES FL 33026

Title	TREASURER
Name	FLORIO, TERRI
Address	3699 SANCTUARY WAY SOUTH
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	DIRECTOR
Name	GILL, CHUCK
Address	2211 ALFORD WAY
City-State-Zip:	WELLINGTON FL 33414

Title	TREASURER
Name	HIGGS, CLARK
Address	2316 CHAUCER STREET
City-State-Zip:	CLEARWATER FL 33765

Title	SECRETARY
Name	GIRARDI, PHIL
Address	826 70TH STREET NORTH
City-State-Zip:	ST PETERSBURG FL 33710

Title	DIRECTOR
Name	ANDREWS, DANA
Address	3103 B SAN RAFAEL STREET
City-State-Zip:	TAMPA FL 33629

Title	DIRECTOR
Name	COLEBOURNE, SCOTT
Address	PO BOX 17144
City-State-Zip:	FERNANDINA BEACH FL 32035

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT HOLLIS

PRESIDENT

01/25/2017

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	GOUTS, MARCELO
Address	5108 TURKEY LAKE ROAD
City-State-Zip:	ORLANDO FL 32819