

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739743

FILED
Mar 19, 2024
Secretary of State
6725534549CC

Entity Name: NATIONAL WOMEN'S TENNIS ORGANIZATION, INC.

Current Principal Place of Business:

2121 S FLAGER DRIVE
WEST PALM BEACH, FL 33401

Current Mailing Address:

P O BOX AA
ELKTON, OR 97436 US

FEI Number: 59-2041901

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 N CALHOUN ST #4
TALLAHASSEE, FL 32301 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 CO-PRESIDENT
Name THU, JULIE
Address 1002 REDBUD TRAIL
City-State-Zip: AUSTIN TX 78746

Title COMPTROLLER
Name THERRIEN, YOLANDA F
Address P O BOX AA
City-State-Zip: ELKTON OR 97436

Title DIRECTOR
Name GRANT, CHRISTINE
Address 151 BROOKS BEND
City-State-Zip: PRINCETON NJ 08540

Title DIRECTOR
Name HARRIS, LOIS
Address 5631 WARWOOD DRIVE
City-State-Zip: ROANOKE VA 24018

Title DIRECTOR
Name ARMSTRONG, LOU
Address 3570 NW 17 COURT
City-State-Zip: FT LAUDERDALE FL 33311

Title CO-PRESIDENT
Name OELSCHLAGER, JOAN
Address 5902 MOUNT EAGLE DR., #1208
City-State-Zip: ALEXANDRIA VA 22303

Title DIRECTOR
Name POLISKY, ANDREA
Address 57 ROCIO COURT
City-State-Zip: PALM DESERT CA 92260

Title DIRECTOR
Name MERKLIN, TERESA
Address 2133 BRANCHWOOD DR
City-State-Zip: GRAPEVINE TX 76051

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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: YOLANDA F THERRIEN

CPA

03/19/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SALE, NELL G
Address 754 CAMINO FRANCISCA
City-State-Zip: SANTA FE NM 87506

Title DIRECTOR
Name FRITZ-KROCKOW, MARIKO
Address 26 BERKELEY AVENUE
City-State-Zip: ORINDA CA 94563

Title DIRECTOR
Name DINERMAN, DAVIDA
Address 12 KINGS ROW
City-State-Zip: ASHLAND ME 01721

Title DIRECTOR
Name AULD, BRYN
Address 1667 LASBURY AVENUE
City-State-Zip: WINTER PARK FL 32789

Title TREASURER
Name CLEMMER, HEIDI
Address 1601 N CENTRAL AVE
PH2
City-State-Zip: FLAGLER BEACH FL 32136

Title DIRECTOR
Name KUHLE, BETSY
Address 41 DUNNINGTON COURT
City-State-Zip: SPRINGBORO OH 45066

Title DIRECTOR
Name SETTLES, KATHY
Address 717 ROCKFORD DRIVE
City-State-Zip: CLAREMONT CA 91711

Title SECRETARY
Name FELLABAUM, KAREN
Address 876 ROBLES AVENUE
City-State-Zip: THE VILLAGES FL 32159