

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N48056

**Entity Name:** GREATER VOLUSIA TENNIS LEAGUE, INC.

**Current Principal Place of Business:**

213 CROOKED TREE TRAIL  
DELAND, FL 32724

**Current Mailing Address:**

P O BOX 333  
DELEON SPRINGS, FL 32130-0333 US

**FEI Number: 59-2012094**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

MANNING, JODI COORDINATOR  
213 CROOKED TREE TRAIL  
DELAND, FL 32724 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: JODI MANNING**

**02/16/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name SANDERS, MIKE  
Address 4 TWELVE OAKS TRAIL  
City-State-Zip: ORMOND BEACH FL 32174

Title SECRETARY  
Name ORLANDO, SAL  
Address 1512 KILRUSH DR.  
City-State-Zip: ORMOND BEACH FL 32174

Title TREASURER  
Name BURKE, GLORIA  
Address 22 MOONGLOW DR.  
City-State-Zip: ORMOND BEACH FL 32174

Title OTHER, ADVISOR  
Name STEPHENS, MARILYN  
Address 830 E. 21ST AVE  
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title PRESIDENT  
Name UFHEIL, JOHN  
Address 230 PARRULLI DR  
City-State-Zip: ORMOND BEACH FL 32174

Title COORDINATOR  
Name MANNING, JODI  
Address 213 CROOKED TREE TRAIL  
City-State-Zip: DELAND FL 32724

*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: JODI MANNING**

**COORDINATOR**

**02/16/2021**

Electronic Signature of Signing Officer/Director Detail

Date