

**2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F95000000386

**Entity Name:** WTA TOUR, INC.

**Current Principal Place of Business:**

100 SECOND AVENUE SOUTH  
SUITE 300-N  
ST. PETERSBURG, FL 33701

**Current Mailing Address:**

100 SECOND AVENUE SOUTH  
SUITE 300-N  
ST. PETERSBURG, FL 33701 US

**FEI Number:** 13-3792400

**Certificate of Status Desired:** No

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

MCBRIDE, COURTNEY  
100 SECOND AVENUE SOUTH  
SUITE 300-N  
ST. PETERSBURG, FL 33701 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 CHAIRMAN & CEO  
Name SIMON, STEVE  
Address 100 SECOND AVENUE SOUTH  
SUITE 300-N  
City-State-Zip: ST. PETERSBURG FL 33701

Title TREASURER  
Name CENEDELLA, MATTHEW  
Address 100 SECOND AVENUE SOUTH  
SUITE 300-N  
City-State-Zip: ST. PETERSBURG FL 33701

Title SECRETARY  
Name MCBRIDE, COURTNEY  
Address 100 SECOND AVENUE SOUTH  
SUITE 300-N  
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR  
Name REICHEL, PETER-MICHAEL  
Address 100 SECOND AVENUE SOUTH  
SUITE 300-N  
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR  
Name PEARSON, CAMERON  
Address 100 SECOND AVENUE SOUTH  
SUITE 300-N  
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR  
Name BARRETT, ADAM  
Address 100 SECOND AVENUE SOUTH  
SUITE 300-N  
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR  
Name VREG, ANJA  
Address 100 SECOND AVENUE SOUTH  
SUITE 300-N  
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR  
Name HAGGERTY, DAVID  
Address 100 SECOND AVENUE SOUTH  
SUITE 300-N  
City-State-Zip: ST. PETERSBURG FL 33701

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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:** COURTNEY MCBRIDE

**REGISTERED AGENT**

**04/12/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title ALTERNATE DIRECTOR  
Name MORAN, BOB  
Address 100 SECOND AVENUE SOUTH  
SUITE 300-N  
City-State-Zip: ST. PETERSBURG FL 33701

Title ALTERNATE DIRECTOR  
Name NESBITT, JACKIE  
Address 100 SECOND AVENUE SOUTH  
SUITE 300-N  
City-State-Zip: ST. PETERSBURG FL 33701

Title ALTERNATE DIRECTOR  
Name BURKE, BRANDON  
Address 100 SECOND AVENUE SOUTH  
SUITE 300-N  
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR  
Name ZUMWALT, KURT  
Address 100 SECOND AVENUE SOUTH  
SUITE 300-N  
City-State-Zip: ST. PETERSBURG FL 33701