

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701503

FILED
Mar 09, 2009
Secretary of State

Entity Name: ROYAL PALM TENNIS CLUB, INC.

Current Principal Place of Business:

7001 S.W. 98TH STREET
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

7001 S.W. 98TH STREET
MIAMI, FL 33156

New Mailing Address:

FEI Number: 59-0937231 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HERRON, JAMES M
2891 SEMINOLE ST
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: BATTLE, TIMOTHY A
Address: 10061 SW 57TH COURT
City-St-Zip: PINECREST, FL 33156

Title: TD () Delete
Name: GRIBBON, PATRICK
Address: 13805 SW 72ND COURT
City-St-Zip: MIAMI, FL 33158

Title: D () Delete
Name: CREWS, MERRILL W
Address: 6385 SW 110TH ST
City-St-Zip: MIAMI, FL 33156

Title: SD () Delete
Name: PANTIN, MARIANNE
Address: 7690 PONCE DE LEON ROAD
City-St-Zip: MIAMI, FL 33143

Title: PD () Delete
Name: SEITZ, MARGERY
Address: 5530 KERWOOD OAKS DRIVE
City-St-Zip: CORAL GABLES, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BATTLE, TIMOTHY A
Address: 10061 SW 57TH COURT
City-St-Zip: PINECREST, FL 33156

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: MARTINS, RALPH
Address: 8365 SW 84TH TERRACE
City-St-Zip: MIAMI, FL 33143

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SEITZ, MARGERY
Address: 5530 KERWOOD OAKS DRIVE
City-St-Zip: CORAL GABLES, FL 33156

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: TIMOTHY A. BATTLE

PRES

03/09/2009

Electronic Signature of Signing Officer or Director

_____ Date