## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

OCHMENT #

161

1. Corporation Name  YOUTH TENNIS FOUNDATION OF FLORIDA, INC.  Principal Place of Business  Mailing Address  3021 CEDAR TRACE  3021 CEDAR TRACE									
	HNGS FL 34689	TARPON SPRINGS FL 34689-8528 US			3. Date Incorporated or Qualified	<b>3a.</b> D.	ate of Last R		
2. Princinal	Place of Business	2a. Mailing Address			····	03/02/1962 4. FEI Number		03/08/19	pplied For
21	Thou are commonly	26	· <del></del>			FA A4FAA94			ot Applicable
Suite, Api	t #, etc	Suite, Apt. #, etc.	<b>├</b> ┐ ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			5. Certificate of Status Desired	X	<b>+</b>	Additional equired
22 City & Sta	ate	City & State			6. Election Campaign Financing			May Be	
23		28			Trust Fund Contribution			to Fees	
Ζιρ	Gountry	Zip	Col	intry		8. This corporation has liability for			. 199.032,
24	25	29	30		·····			No No	
	9. Name and Address of Curre	9. Name and Address of Current Registered Agent			Name	10. Name and Address of New Re	Gistered	Agent	<del></del>
				B1	INGITIC				
KELLEY, PIERCE				82	Street Add	ress (P.O. Box Number is Not Acceptat	ole)		
3021 CEDAR TRACE TARPON SPRINGS FL 34689				83	······································				
IANEC	04 9FNINGS FL 34003			84	<u></u>			· · · · · · · · · · · · · · · · · · ·	·
					City		FL	<b>85</b> Zip	Code
agerit I SIGNATURE	Signative typed or proced records registered a					ition's board of directors. I hereby acce	DATE		
TITLE	P	DELETE		ITLE		Nobinetogenia (see 10 or) (	32.10704	Change	Addition
NAME	KELLEY, PIERCE			1.2 NAME					<del></del>
STREET ADDRESS	**** ****		1.3 5	1.3 STREET ADDRESS					
CITY-St-ZiF	TARPON SPRINGS FL 346	89	1.40	1.4 CITY-ST-ZIP					
TITLE	STR DELETE			21 TITLE				☐ Change	Addition
NAME	JAGGER, EDWIN			AME					
STREET ADDRESS	9-1-1-1-1-1			2.3 STREET ADDRESS					
CITY-ST-ZIP	NO. REDDINGTON BEACH FL 33708				ST-ZIP			Chart	1 1 4 3 2 1 5 1
TITLE	D []] DELETE			31 THTLE 3.2 NAME		:		☐ Change	Addition
NAME CAREET ACRES OF	MILLER, TUG	£.			r robbeco				
STREET ADDRESS	, , , , , , , , , , , , , , , , , , ,	U	- 1		F ADDRESS				
CITY-ST-70F TITLE	BOCA RATON FL 33432			3.4. CITY-ST-ZIP 4.1 TITLE				Change	Addition
NAME	VON, BEEBE			NAME	}				
STREET ADDRESS					T ADDRESS				
CITY - ST - ZIP	MIAMI FL 33146		440	OITY-S	ST-ZIP				
TITLE	V	☐ DELETE	5.1	ITLE				Change	Addition
NAME	KELLEY, CHRISTOPHER		5.21	NAME	)				
STREET ADDRESS	100: 11:0: 00 01		538	TREET	T ADDRESS				
Crity-Si-ZiF	MIAMI FL 33138				ST-ZIP				
TITLE	ח	DELETE	<b>1</b> 611	ITLE	ı			Change	Addition

6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 of Block 12 if changed; or on an attachment with an address.

6.3 STREET ADDRESS

62 NAME

SIGNATURE:

KELLEY, ALAN

882 N.E. 97TH STREET

MIAMI SHORES FL 33138

NAME

STREET ADDRESS

Daytime Phone # 0069056

Date

**FILED** 

Mar 24 1997 8:00am

Secretary of State