## FILE NOW: FILING FEE IS \$61.25

FILED NONPROFIT Apr 17 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 703667 YOUTH TENNIS FOUNDATION OF FLORIDA, INC. Principal Place of Business Malling Address 3021 CEDAR TRACE 3021 CEDAR TRACE 3. Date Incorporated or Qualified TARPON SPRINGS FL 34689 TARPON SPRINGS FL 34689 03/02/1962 4. FEI Number Applied For 59-6153374 Not Applicable 2. Principal Place of Business 2e. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 Fee Required Suite, Apt. #, etc. Sulte, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 22 27 City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KELLEY, PIERCE Street Address (P.O. Box Number is Not Acceptable) 3021 CEDAR TRACE 83 TARPON SPRINGS FL 34689 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Addition TITLE 1.1 TITLE Change F. JAgger Conely Cone NAME KELLEY, PIERCE 1.2 NAME CR2E037 **3021 CEDAR TRACE** STREET ADDRESS 1.3 STREET ADDRESS FC 33556 TARPON SPRINGS FL 34689 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE STR NAME JAGGER, EDWIN 2.2 NAME 557-73RD ST. 2.3 STREET ADDRESS STREET ADDRESS NO. REDDINGTON BEACH FL 33708 CITY-ST-ZIP 2. 4 CITY-ST-7/P DELETE Change Andition TITLE 3.1 TITLE MILLER, TUG NAME 3.2 NAME 140 S.E. 5TH AVE, APT 446 3.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33432** 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE NAME von, beebe 4. 2 NAME 2320 SW 24TH ST STREET ADDRESS 4.3 STREET ADDRESS **MIAM! FL 33145** 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ... Addition TITLE 5 1 TITLE KELLEY, CHRISTOPHER NAME 5.2 NAME 1237 N.E. 99 ST STREET ADORESS 5.3 STREET ADDRESS MIAMI FL 33138 CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE NAME KELLEY, ALAN 6.2 NAME

14. I 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 or Block 13 if changed, or on an attachment with an address. SIGNATURE: 8/3-38/-

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

882 N.E. 97TH STREET

MIAMI SHORES FL 33138

STREET ADDRESS

CITY-ST-ZIP