2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2006 8:00 am Secretary of State

| DOCUMENT # 703667 1. Entity Name YOUTH TENNIS FOUNDATION OF FLORIDA, INC. | | | | | | 05-02-2006 90153 033 ****61.25 | | | | |
|--|---|--|--|---------------------------------------|--|--------------------------------|--|-------------------------------------|-------------------------------|--|
| Principal Place of Business 980 TYRONE BLVD. ST. PETERSBURG, FL 33710 | | Mailing Address P.O. BOX 41100 ST. PETERSBURG, FL 33743-1100 | | | | | | | | |
| | | | | | | | | | 1 1 11 | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 03312006 | Chg-NP | CR2E037 (1 | 1/05) | | | |
| City & State | | City & State | | 4. FEI Number 59-61533 | 374 | | | olied For Applicable | | |
| Zip | Country | Zip | Cou | ntry | 5. Certificate of | Status Desired | | 75 Addit Required | | |
| | 6. Name and Address of Currer | nt Registered Agent | | | 7. Name and A | dress of New | Registered Agen | ıt | | |
| JAGGER | FDWIN | | | Nama | EU BRA | NT A | | | | |
| JAGGER, EDWIN 980 TYRONE BLVD. SAINT PETERSBURG, FL 33710 | | | | | ss (Pd Bbx Number i | s Not Acceptab | id. | | | |
| SAINT PETENSBURG, FL 33/10 | | | | 57. P | ETERSE | | | Zio Codo | | |
| | | | | City | | | FL | 33 | 710 | |
| | e named entity submits this statement tions of registered agent. | A | registere | sa omee or regi | istered agent, or both, | 4/2/ | n / | nar vivi, i | and doop | |
| SIGNATURE | Signature, typed or printed name of registered age | ent and tigle il applicable. (NOT | E: Registered | d Agent signature rec | quired when reinstating) | 1 3/10 | DATE | | | |
| SIGNATURE | Signature, typed or printed name of registered age. Filling Fee is \$61.25 Due by May 1, 2006 | em and tigloid applicable. (NO) 9. Election Ca Trust Fund | mpaign F | inancing | \$5.00 May Be Added to Fees | II. | DATE Make check pa | • | | |
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12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

| SIGNATURE: Brant a Bailey | Brant A. Bailey, Secretary | 4/28/06 | 17271-381-2300 |
|-------------------------------------|----------------------------|-----------------|----------------|
| SIGNATURE AND TYPED OR PRINTED NAME | Date | Daytime Phone # | |