

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703667

FILED
Feb 28, 2009
Secretary of State

Entity Name: YOUTH TENNIS FOUNDATION OF FLORIDA, INC.

Current Principal Place of Business:

2791 NW 83 TERRACE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

2791 NW 83 TERRACE
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 59-6153374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, H D
2791 NW 83 TERRACE
CORAL SPRINGS, FL 33065 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: VP () Delete
Name: KELLEY, PIERCE,
Address: P.O. BOX 1050
City-St-Zip: CEDAR KEY, FL 32625

Title: S () Delete
Name: HORN, JEFF
Address: 1219 W SMITH ST
City-St-Zip: ORLANDO, FL 32804

Title: TR () Delete
Name: MILLER, TUG
Address: 2791 NW 83 TERRACE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: P () Delete
Name: JAGGER, ED
Address: 12810 POINSETTIA AVE
City-St-Zip: SEMINOLE, FL 33776

Title: VP () Delete
Name: KELLEY, CHRISTOPHER,
Address: 1237 N.E. 99 ST
City-St-Zip: MIAMI, FL 33138

Title: D () Delete
Name: KELLEY, ALAN,
Address: 882 N.E. 97TH STREET
City-St-Zip: MIAMI SHORES FL, 33138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TR (X) Change () Addition
Name: MILLER, H D
Address: 2791 NW 83 TERRACE
City-St-Zip: CORAL SPRINGS, FL 33065

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

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

Title: D (X) Change () Addition
Name: JAGGER, BOB,
Address: 3585 RICHMOND ST,
City-St-Zip: JACKSONVILLE, FL 32205

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: H D MILLER

TR

02/28/2009

Electronic Signature of Signing Officer or Director

Date