

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90037 011 ****70.00

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1. Entity Name
**UNITED STATES TENNIS ASSOCIATION-FLORIDA SECTION
, INC.**

Principal Place of Business
**1 DEUCE COURT
SUITE 100
DAYTONA BEACH FL 32124
US**

Mailing Address
**1 DEUCE COURT
SUITE 100
DAYTONA BEACH FL 32124
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **23-7161642**

Applied For

Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name **DOUG BOOTH**
Street Address (P.O. Box Number is Not Acceptable)
1 DEUCE COURT, STE 100
City **DAYTONA BEACH** FL Zip Code **32124**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **DOUG BOOTH, Doug Booth**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/29/2003

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDD MORGAN, NANCY 2395 HAWTHORNE DRIVE CLEARWATER FL 33763	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MARIA, CERONE 8000 CUMBERLAND ROAD LARGO FL 33777	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HODGE, BJ 1819 NW 98 STREET GAINESVILLE FL 32606	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KRAJEWSKI, MATT 557 SANDY OAKS BLVD. ORMOND BEACH FL 32174	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CLEVELAND, DON 1627 NORTH SWINTON AVE. DELRAY BEACH FL 33444	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT BRUCE BOIKO 6301 RIVIERA DRIVE CORAL GABLES, FL 33146	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER JO ANN ZIRPOLI 112 DOMINICIA WAY NICEVILLE, FL 32578	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT CELIA REHM 2882 PLUMMERS COVE RD JACKSONVILLE, FL 32223	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY PAUL VALENTINE 1 RIVER RIDGE TRAIL ORMOND BEACH, FL 32174	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT-ELECT DON CLEVELAND 1627 NORTH SWINTON AVE DELRAY BEACH, FL 33444	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:

DOUG BOOTH

1/28/2003

Daytime Phone #

CR2E037 (10/02)