FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

(5)

FILED Feb 05 1998 8:00am Secretary of State

GREATER MIAMI TENNIS FOUNDATION, INC.						
Principal Plac	e of Business	Mailing Address	S			L candit tones eran estat erite desti ant selet eter atori arbit erati erati erati font
10305 SW 56 AVENUE 10305 SW 56 AVENUE MIAMI FL 33156-3426 MIAMI FL 33156-3426						3. Date Incorporated or Qualified
2. Principal Place of Business 2a. Mailing Address			res s	 -		5. Certificate of Status Desired \$8.75 Additional
21 26						Fee Required
I Suite, Adi. #. etc. I Suite, Adi. #. etc.			, etc.			6. Election Campaign Financing \$5.00 May Be
22 27 City & State City & State					· · ·	Trust Fund Contribution Added to Fees 7. Is this nonprofit corporation a homeowners association?
23		— <u> </u>	28			Yes No
[Zip	Country	Zip	C	country	/	8. This corporation owes or has paid the current year Intangible
24	25	29	30		ı	Personal Property Tax due June 30. 🔲 Yes 🔲 No
	9. Name and Address of Curr	ent Registered Agent		-		10. Name and Address of New Registered Agent
				81	Name	,
FALES, DONNA				82	Street A	t Address (P.O. Box Number is Not Acceptable)
	W 56 AVENUE			83		
MIAMIF	L 33156-3426					
				84	City	FL 85 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 II applicable	(NOTE: Regist	ered Age	ent signature i	re required when reinstating) DATE
12.		AND DIRECTORS	1:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	□ DI	ELETE 1.	1 TITLE		☐ Change ☐ Addition
NAME	B REWER, LEW		1.2 NAME			
STREET ADDRESS	14745 SW 83 PLACE	1.3		3 STREET	ADDRESS	
CITY-ST-ZIP	MIAMI FL			1.4 City-St-ZiP		
TITLE	VO	L.J D€	ELETE 2:	1 TITLE		Change Addition
NAME	BUCHOLZ, EARL		22	2.2 NAME .		
STREET ADDRESS	2 ALHAMBRA PLAZA #61				ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	Пы		4 CITY - S	ST-ZIP	
TITLE	VP			TITLE		Change Addition
NAME OTOTET ADDOCSOS	SIROTA, STEVE 9500 S DADELAND BLVD. (1004		2 NAME	1DDDCCC	
STREET ADDRESS	MIAMI FL	700 1			ADDRESS	
CITY-ST-ZIP TITLE	\$	Пре		1. CITY-5 1 title	51-ZIP	Change Addition
NAME	ANNEAR, TOM			2 NAME	1	
STREET ADDRESS	LIPTON CHAMPIONSHIPS,	ALHAMBRA PL7 #F			ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	· · · · · · · · · · · · · · · · · · ·		CITY-S		
TITLE	TD	DE		TITLE		☐ Change ☐ Addition
NAME	RUBINOFF, ED			NAME		
STREET ADDRESS	501 NE FIRST AVE				ADDRESS	
CITY-ST-ZIP	MIAMI FL			CITY-S		
TITLE	DELETE DELETE			6.1 TITLE		☐ Change ☐ Addition
NAME	SIROTA, STEVE		62	NAME	İ	
STREET ADDRESS	9500 S. DADELAND BLVD.	#601	6.3	STREET	ADDRESS	
CITY-ST-ZIP	MIAMI FL			CITY-S		
14 heroby o	baileans anitometral adt tadt villen	with this filing does not	au alifu for the c	wama	tion states	ad in Section 119 07/3)(i) Florida Statutes I further certifu that the information I

I nereby certify that the information supplied with this tiling 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.