

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728300

FILED  
Apr 25, 2008  
Secretary of State

**Entity Name:** GREATER MIAMI TENNIS AND EDUCATION FOUNDATION, INC.

**Current Principal Place of Business:**

7320 CRANDON BOULEVARD  
KEY BISCAYNE, FL 33149 US

**New Principal Place of Business:**

**Current Mailing Address:**

7320 CRANDON BOULEVARD  
KEY BISCAYNE, FL 33149 US

**New Mailing Address:**

FEI Number: 59-1603794

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RUBINOFF, EDWARD  
501 NE 1ST AVENUE  
SUITE 300  
MIAMI, FL 33132 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: PD ( ) Delete  
Name: RUBINOFF, EDWARD  
Address: 501 NE FIRST AVENUE  
City-St-Zip: MIAMI, FL 33132

Title: VPD ( ) Delete  
Name: CHAMPION, JAMES A  
Address: 6501 NW 36 STREET, SUITE 300  
City-St-Zip: MIAMI, FL 33166

Title: TD ( ) Delete  
Name: RIVERA, ANJENETTE L  
Address: 6501 NW 36 STREET, SUITE 300  
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete  
Name: CRABTREE, CAROL  
Address: 10721 SW 70 COURT  
City-St-Zip: MIAMI, FL 33156

Title: D ( ) Delete  
Name: BOTJER, ROBERT  
Address: 3175 VIA ABITARE  
City-St-Zip: MIAMI, FL 33133

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: EDWARD RUBINOFF

PD

04/25/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date