

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731628

FILED  
Feb 11, 2009  
Secretary of State

**Entity Name:** TENNISPLACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1250 TENNISPLACE CT.  
SANIBEL, FL 33957 US

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 189  
CAPTIVA, FL 33924

**New Mailing Address:**

**FEI Number:** 59-1649387

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROYAL SHELL PROPERTY MGMT  
1547 PERIWINKLE WAY  
SANIBEL, FL 33957 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: SD ( ) Delete  
Name: FORD, ARLINE  
Address: 1250 TENNIS PL CT B23  
City-St-Zip: SANIBEL, FL 33957

Title: PD ( ) Delete  
Name: BARKER, KAREN  
Address: 1250 TENNISPLACE CT #D31  
City-St-Zip: SANIBEL, FL 33957

Title: TD ( ) Delete  
Name: LIEBLEIN, MARGARET  
Address: 1250 TENNISPLACE CT, E-24  
City-St-Zip: SANIBEL, FL 33957

Title: VD ( ) Delete  
Name: SCHAFF, LEE  
Address: 4462 KIWANIS RD  
City-St-Zip: CINCINNATUS, NY 13040

Title: D ( ) Delete  
Name: DUNN, JOHN  
Address: 2555 GROSS POINT RD 405  
City-St-Zip: EVANSTON, IL 60201

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

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

Title: VD (X) Change ( ) Addition  
Name: BARKER, KAREN  
Address: 1250 TENNISPLACE CT #D31  
City-St-Zip: SANIBEL, FL 33957

Title: TD (X) Change ( ) Addition  
Name: ELIZABETH, HAYES  
Address: 1250 TENNISPLACE CT, C-22  
City-St-Zip: SANIBEL, FL 33957

Title: PD (X) Change ( ) Addition  
Name: SCHAFF, LEE  
Address: 4462 KIWANIS RD  
City-St-Zip: CINCINNATUS, NY 13040

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: LEE SCHAFF

PD

02/11/2009

Electronic Signature of Signing Officer or Director

Date