

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 17, 2004 8:00 am
Secretary of State

02-17-2004 90039 019 ****61.25

DOCUMENT # 738538

1. Entity Name

COURTSIDE TENNIS CLUB, INC.



Principal Place of Business

512 N AUBURN ROAD
VENICE FL 34292-1600

Mailing Address

512 N AUBURN ROAD
VENICE FL 34292-1600

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

59-1745556

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LIPP, GEORGE W. JR.
2860 MYAKKA ROAD
VENICE FL 34293

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PIXLEY, G. WILLIAM 2206 CALUSA LAKES BOULEVARD NOKOMIS FL 34275	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GAUVREAU, JAMES 701 VALENCIA RD VENICE FL 34285	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD THORNER, BETTY 1700 TREE HOUSE CIRCLE SARASOTA FL 34231	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD OSHER, JAMES 921 BAYSHORE RD NOKOMIS FL 34275	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOLAN, BARBARA 5040 WHITE STONE DR VENICE FL 34293	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAHN, JUDY 2013 WHITE FEATHER LANE NOKOMIS FL 34275	☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BARBARA VENDEMA 537 MARSH CREEK RD. VENICE, FL 34292	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEB CANHAM 216 HIGH POINT DR. VENICE, FL 34292	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAROL GALLAGHER 989 YBOR ST. VENICE, FL 34292	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GEORGE HENNESSY 2515 ALAMANDER AVE. ENGLEWOOD, FL 34223	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAURIE MOONEY 1141 COVEY CIRCLE VENICE, FL 34293	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBERT MUMPER 1555 TAAPON CENTER DR. E230 VENICE, FL 34285	☐ 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)(i), 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:

William Pixley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
WILLIAM PIXLEY
PRESIDENT

2-12-04

Date

941.485-2000

Daytime Phone #