

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 20, 2007 8:00 am
Secretary of State

03-20-2007 90021 023 ****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 - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E037 (10/06)

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	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GRENS, RON 1252 WASTERSIDE LANE VENICE FL 34292 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BILL BEHNING 4504 CERNALACT. VENICE, FL 34293 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HENRY, DON 1250 CAPRI ISLES BLVD VENICE FL 34292 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD RACE BERGMAN 509 MARSH CREEK RD. VENICE, FL 34292 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HUNT, GEORGE 1323 PINE NEEDLE DR VENICE FL 34292 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DICK VLONTIS 716 BIRD BAY DR.W VENICE, FL 34292 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIEZ, MARY ELLEN 1120 LARCHMONT DR ENGLEWOOD FL 34223 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANDY ALLEN 1680 MISSION VALLEY BLVD. LAUREL, FL 34272 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOONEY, LAURIE 1141 COVEY CIRCLE VENICE FL 34293 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARY NEACY 1250 CAPRI ISLES VENICE, FL 34292 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUIE, GRADY 143 E MIAMI AVE VENICE FL 34285 ☐ Delete	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 exemptions contained in Section 119, 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 P. Behning
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #