

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 739743 ✓

1. Entity Name

THE SENIOR WOMEN'S TENNIS ASSOCIATION, INC.

FILED
Jun 13, 2000 8:00 am
Secretary of State

06-13-2000 90003 033 ****61.25

Principal Place of Business

Mailing Address

155 NORTHAMPTON RD
AMHERST MA 01002
US

155 NORTHAMPTON RD
AMHERST MA 01002-2513
US

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

59-2041901

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PLANTE, MARY ANN
1152 NEW YORK AVE.
WINTER PARK FL 32789

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.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME LEACH, LAURINE
STREET ADDRESS 40 ROCKPORT RD
CITY-ST-ZIP WESTON MA 02193

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME SHEPHERD, THEODORA
STREET ADDRESS 155 NORTH HAMPTON RD
CITY-ST-ZIP AMHERST MA 01002

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME WEINSTOCK, SHEILA
STREET ADDRESS 43 CREST RD
CITY-ST-ZIP FRAMINGHAM MA 01702

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME FIDURKO, DIANE
STREET ADDRESS 356 HILCREST RD
CITY-ST-ZIP NEEDHAM MA 02192

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME WILLIAMS, LOIS
STREET ADDRESS 14823 LAQUINTA LANE
CITY-ST-ZIP HOUSTON TX

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME FURTNEY, SUE
STREET ADDRESS 58630 130TH CT.
CITY-ST-ZIP APPLE VALLEY MN

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/1/00

781-444-7232

Date

Daytime Phone #