

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2003 8:00 am
Secretary of State

0098321

DOCUMENT # 739743

1. Entity Name

THE SENIOR WOMEN'S TENNIS ASSOCIATION, INC.



Principal Place of Business

515 NORTH SHORE ROAD
LAKE OSWEGO OR 97034
US

Mailing Address

PO BOX 142
LAKE OSWEGO OR 97034
US

2. Principal Place of Business

100 Evans Lane #305D

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Manalapan, FL

City & State

Manalapan, FL

Zip

33462

Country

USA

Zip

33462

Country

USA

4. FEI Number 59-2041901

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

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

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

Mary Ann Plante

3-20-03

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
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete

P
ANDERSON, MARGARET
515 NORTH SHORE ROAD
LAKE OSWEGO OR 97034

TITLE NAME ☐ Delete

T
KASH, KRIS
11960 SW FINCH AVENUE
BEAVERTON OR 97007

TITLE NAME ☐ Delete

S
KOTKE, JOAN
4339 134TH PLACE SE
BELLEVUE WA 98006

TITLE NAME ☐ Delete

D
DUNLOP, KAREN
18529-186TH PLACE NE
WOODINVILLE WA 98072

TITLE NAME ☐ Delete

D
JONES, JOYCE
13739-15TH STREET NE, SUITE B12
SEATTLE WA 98125

TITLE NAME ☐ Delete

D
KREBS, VIRGINIA
1819-41ST AVENUE EAST
SEATTLE WA 98112

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME ☐ Change ☐ Addition

P
Mary Wilson
100 Evans Lane #305D
Manalapan, FL 33462

TITLE NAME ☐ Change ☐ Addition

T
Lufendig
102 Virginia St.
St. Simon's Island, GA 31522

TITLE NAME ☐ Change ☐ Addition

S
Pat Greer
2121 S. Flagler Dr.
W. Palm Beach, FL 33401

TITLE NAME ☐ Change ☐ Addition

P
Carol B. Cley
610 Tennis Club Dr. #307
Ft. Lauderdale, FL 33311

TITLE NAME ☐ Change ☐ Addition

D
Belmar Gunderson
W. 8068 830TH Ave.
River Falls, WI 54022

TITLE NAME ☐ Change ☐ Addition

P
Pat Parsons
2525 Ocean Blvd. C-3
Corona Del Mar, CA 92625

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

Pat Parsons

3-20-03 561-655-7332

0098321 (10/02)