

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 07, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # 756796**

1. Entity Name

**NORTH FLORIDA TENNIS UMPIRES ASSOCIATION, INC.**



Principal Place of Business

**11707 TIERRA VERDE LANE  
JACKSONVILLE FL 32258**

Mailing Address

**11707 TIERRA VERDE LANE  
JACKSONVILLE FL 32258**



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 (10/07)

4. FEI Number  
**59-2114364**

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

**EGNER, DARRELL  
11707 TIERRA VERDE LANE  
JACKSONVILLE FL 32258**

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 changing)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2008**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VPD  
HICKS, STUART  
P.O. BOX 330747  
ATLANTIC BEACH FL 32223** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**U00000851118  
03/25/08-80025-004 61.25** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**ST  
EGNER, DARRELL  
11707 TIERRA VERDE LANE  
JACKSONVILLE FL 32258** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**ST  
EGNER, DARRELL  
11707 TIERRA VERDE LANE  
JACKSONVILLE FL 32258** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
HECKMAN, GERALD  
308 LAUDEN COURT  
PONTE VEDRA BEACH FL 32082** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
HECKMAN, GERALD  
308 LAUDEN COURT  
PONTE VEDRA BEACH FL 32082** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
HOLLOMAN, KEN  
220 OLEANDER STREET  
NEPTUNE BEACH FL 32266** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
HOLLOMAN, KEN  
220 OLEANDER STREET  
NEPTUNE BEACH FL 32266** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
BOOTH, ROBERT  
8138 BAHIA BLANCA ST  
JACKSONVILLE FL 32256** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
BOOTH, ROBERT  
8138 BAHIA BLANCA ST  
JACKSONVILLE FL 32256** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
LUBAS, HELEN  
1827 CHERRY STREET  
JACKSONVILLE FL 32205** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
LUBAS, HELEN  
1827 CHERRY STREET  
JACKSONVILLE FL 32205** ☐ 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: **Darrell Egner - DARRELL EGNER** 3/5/08 904-268-3546