

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766508

FILED
Apr 17, 2009
Secretary of State

Entity Name: WTC PHASE I ASSOCIATION, INC.

Current Principal Place of Business:

3304-3310 EUROPA DRIVE
NAPLES, FL 34105 US

New Principal Place of Business:

Current Mailing Address:

4802 AIRPORT-PULLING ROAD
NAPLES, FL 34105 US

New Mailing Address:

FEI Number: 59-2337276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WORLD TENNIS CLUB, INC.
4802 AIRPORT-PULLING ROAD
NAPLES, FL 34105 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: COMEAUX, CAROL
Address: 3304 EUROPE DR., #1
City-St-Zip: NAPLES, FL 34105

Title: D () Delete
Name: CALKINS, J. SCOTT
Address: PO BOX 1188
City-St-Zip: HARRISBURG, PA 17108

Title: D () Delete
Name: HARKINS, KENNETH
Address: 33 SPIT BROOK ROAD
City-St-Zip: NASHUA, NH 03060

Title: ST () Delete
Name: VODREY, JACKMAN S
Address: 517 BROADWAY
City-St-Zip: EAST LIVERPOOL, OH 43920

Title: PD () Delete
Name: TOMKO, WAYNE L
Address: 1500 RIVERSIDE DR.
City-St-Zip: OTTAWA, CA K1G 4J4

Title: AT () Delete
Name: KELLER, THOMAS
Address: 4802 AIRPORT ROAD
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DOBSON, ROBERT
Address: 3308 EUROPA DRIVE, #30
City-St-Zip: NAPLES, FL 34105

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AT (X) Change () Addition
Name: LOSCHIAVO, ETHAN
Address: 4802 AIRPORT ROAD
City-St-Zip: NAPLES, FL 34105

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WAYNE TOMKO

PD

04/17/2009

Electronic Signature of Signing Officer or Director

Date