

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Jan 16 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 857397 (4)  
1. Corporation Name  
TENNIS INDUSTRY ASSOCIATION, INCORPORATED



Principal Place of Business  
200 CASTLEWOOD DRIVE  
NORTH PALM BEACH FL 33408  
US

Mailing Address  
% JOHN D. RIDDLE  
200 CASTLEWOOD RD  
N PALM BCH FL 33408

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
08/12/1983

4. FEI Number  
06-1050343  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RIDDLE, JOHN D.  
200 CASTLEWOOD DRIVE  
N. PALM BEACH FL 33408

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME BAUGH, JIM  
STREET ADDRESS 8700 W BRYN MAWR AV  
CITY-ST-ZIP CHICAGO IL ☒ DELETE

1.1 TITLE P  
1.2 NAME Kamperman, Kurt  
1.3 STREET ADDRESS 19 Pope Ave., Ste. 107  
1.4 CITY-ST-ZIP Hilton Head Island, SC 29928 ☐ Change ☒ Addition

TITLE D  
NAME BAUGH, JIM  
STREET ADDRESS 8700 W. BRYN MAWR AVE  
CITY-ST-ZIP CHICAGO IL 60631 ☐ DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S  
NAME SANTORUM, DAN  
STREET ADDRESS 109 EXECUTIVE CTR  
CITY-ST-ZIP HILTON HEAD ISLAND SC ☒ DELETE

3.1 TITLE D  
3.2 NAME Ferman, Rick  
3.3 STREET ADDRESS 70 West Red Oak Lane  
3.4 CITY-ST-ZIP White Plains, NY 10604 ☐ Change ☐ Addition

TITLE V  
NAME FONTE, JILL  
STREET ADDRESS 121 COMMODORE DR  
CITY-ST-ZIP NEW SMYRNA FL ☐ DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☒ Addition

TITLE S  
NAME HECKLER, TIM  
STREET ADDRESS 3535 BRIARPARK DR  
CITY-ST-ZIP HOUSTON TX ☒ DELETE

5.1 TITLE D  
5.2 NAME Margin, Rick  
5.3 STREET ADDRESS One Tennis Court  
5.4 CITY-ST-ZIP Bordentown, NJ 08505 ☐ Change ☐ Addition

TITLE A  
NAME RIDDLE, JOHN D.  
STREET ADDRESS 200 CASTLEWOOD DR.  
CITY-ST-ZIP N.PALM BCH. FL ☒ DELETE

6.1 TITLE D  
6.2 NAME Brad Patterson  
6.3 STREET ADDRESS 200 Castlewood Dr.  
6.4 CITY-ST-ZIP N. Palm Beach, FL 33408 ☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Brad Patterson 1/5/98

561/840-1127

CR2E034 (10/97)