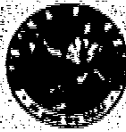


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

**APPROVED
AND
FILED**

95 APR 19 AM 1:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H72244 (7)

1. Corporation Name

NICK BOLLETTIERI TENNIS ACADEMY, INC.

Principal Place of Business

**5500 34TH STREET WEST
BRADENTON FL 34210**

Mailing Address

**5500 34TH STREET WEST
BRADENTON FL 34210**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/21/1985

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2580687

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

**ONE ERIEVIEW PLAZA
1300
CLEVELAND OH
44114 USA**

9. Name and Address of Current Registered Agent

**LUTZ, DANA
5500 34TH STREET WEST
BRADENTON FL 34210**

10. Name and Address of New Registered Agent

81

Name

JIM MURPHY

82

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

5500 34TH STREET WEST

83

84

City

BRADENTON

FL

85

Zip Code

34210

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

Jim Murphy

(NOTE: Registered Agent signature required when re-registering)

DATE

4/14/95

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**PO
BOLLETTIERI, NICHOLAS J.
5500 34TH STREET
BRADENTON FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**VSD
LAFAYE, ARTHUR J., JR.
1 ERIEVIEW PLAZA
CLEVELAND OH**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**VDS
CARPENTER, WM. H. (ASST)
1 ERIEVIEW PLAZA
CLEVELAND OH**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**VT
YODER, RAY
1 ERIEVIEW PLAZA
CLEVELAND OH**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**C
KAIN, ROBERT
1 ERIEVIEW PLAZA
CLEVELAND OH**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**V
MEEKMA, THEODORE
1 ERIEVIEW PLAZA
CLEVELAND OH**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

**5500 34TH STREET WEST
BRADENTON, FL 34210**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(4), 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: *Ray A. Yoder*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VICE-PRESIDENT

4/16/95

(216) 592-1200