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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

**DOCUMENT # J14321** 

(0)

TENNIS	PARTNERS, INC.	·	·							
Principal Plac 2010 NW 55 A MARGATE FL		2040 NW 55 /	Mailing Address 2040 NW 55 AVE MARGATE FL 33063-3753				I ADDIANA CIRIT ANDRE BROOK TAKEN (SAUSA ASBAT 	OJDEF OTOKA I	2011 <b>8</b> 1811 011	DIN DYBYY 1961
manus (E.	••••	m/a,ca,/a / a	0000				3. Date Incorporated or Qualified 05/14/1986		ate of Last 02/1996	
	tace of Business	2a. Mailing A	ddress				4, FEI Number			Applied For
Suite, Apt	#, etc.	26 Suite, Apl	t. #, etc.			·····	04-2918998			Not Applicab  5 Additional
22		27		····		<del></del>	5. Certificate of Status Desired		Fee	Required
City & Stat	le	City & Sta	ate				6. Election Campaign Financing Trust Fund Contribution			00 May Be od to Fees
<b>Ζ</b> (ρ)	Country	Zip		Count	try		8. This corporation has liability for			
24	25	29		30		<del></del>	Florida Statutes	] Yes [	□ No	
	9. Name and Address of Curre	nt Registered Age	nt	B	ii!	Name	10. Name and Address of New Re	gistered	Agent	
	LIVAN, WILLIAM F. 1 E. ATLANTIC BLVD.						ess (P.O. Box Number is Not Acceptat			,
S-4°	10			8	-	Street Addr	ess (F.O. Box number is not acceptate	ле) 		
POI	MPANO BEACH FL 33062			8	33					
				8	14	City	***************************************	FL	<b>85</b> Zi	ip Code
SIGNATURE	Signature typed or frided the acollegistic Lag	yen and the diapplicable		i. Registered A			ion's board of directors. I hereby acce ed when rainstating)	DATE		
12.	OFFICERS AN	ND DIRECTORS	DELETE	13.	F	<del></del>	ADDITIONS/CHANGES TO OFFIC	CERS AND	DIRECTO Change	
NAME	FUNK, DAVID G.	<u>.                                    </u>	J 00.007.0	1.2 NAM					C. VIII.	
STREET ADDRESS	2040 NW 55 AVE			1.3 STRE	EET A	adoress				
C-TY - ST - ZIP	MARGATE FL 33083		1 60 FTC	1.4 CITY		- ZIP			TT 65000	- Till Additi
TITLE NAME	D Katzeff, Richard	L	DELETE	2 1 TITLI 2 2 NAM		1			Chang	ge [] Additi
STREET ADDRESS	123 COONAMESSETT CIRCLE	E		1		address				
CITY-SI-7P	E FALMOUTH MA			2. 4 CIT	Y · SI	T-21P				
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CITY-ST-ZIP				3.3 SIM		1				
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NAME				4. 2 NAN						
STREET ADDRESS						ADORESS				
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NAME			-	5 2 NAM					·	
STREET ADDRESS				5.3 STRI	EET A	ADDRESS				
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TITLE		L	DELETE	6.1 TITL 6.2 NAM					Chang	ge [] Additi
MAMIC MAMIC	Į.			O.Z MAN	nE CCT I	*DDBCCC				

6.4 CITY-ST-ZIP 14. If do 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:

**FILED** 

Jan 23 1997 8:00am

Secretary of State