2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N0000000599

Apr 16, 2002 8:00 AM Secretary of State

Entity Name: CHARLOTTE COUNTY COMMUNITY TENNIS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 306 E. OLYMPIA AVE., P.O. BOX 510400 PUNTA GORDA, FL 339510400 **Current Mailing Address: New Mailing Address:** 306 E. OLYMPIA AVE., P.O. BOX 510400 PUNTA GORDA, FL 339510400 FEI Number: 65-1010699 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROONEY, J. MICHAEL ESQ. 306 E. OLYMPIA AVE. PUNTA GORDA, FL 33950 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete KRAUSE, MICHELLE KRAUSE, MICHELE Name: Name: 2906 TAMIAMI TR. Address: 2906 TAMIAMI TR. Address: City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: PUNTA GORDA, FL 33950 Title: Title: (X) Change () Addition () Delete LINK, DONNA Name: SHEPARD, SHELLY Name: Address: 22400 GLENEAGLE TERR. Address: 12374 S.W.AUSTIN AVE City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: LAKE SUZY, FL 34269 Title: () Delete Title: () Change () Addition BESSIRE, SUZIE Name: Name: 2498 CELEBES COURT Address: Address: City-St-Zip: PORT CHARLOTTE, FL 33948 City-St-Zip: Title: () Delete Title: TREA (X) Change () Addition MCQUEEN, SHARON Name: Name: MCQUEEN, SHARON P.O. BOX 510837 Address: Address: P.O. BOX 510837 City-St-Zip: PUNTA GORDA, FL 339510837 City-St-Zip: PUNTA GORDA, FL 339510837 Title: () Delete Title: () Change () Addition TAYLOR, KATHY Name: Name: 1001 WEST MARION AVE.,#4 Address: Address: City-St-Zip: PUNTA GORDA, FL 66950 City-St-Zip: Title: () Delete Title: () Change () Addition WETZEL, GAIL Name: Name: Address: P.O. BOX 2897 Address: PORT CHARLOTTE, FL 33949 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHELE KRAUSE PRES 04/16/2002

ELAINE PAPPAS SECRETARY 604 BRINDISI COURT PUNTA GORDA, FL 33950

ART ANDERSSEN DIRECTOR 3817 ST. GIRONS DRIVE PUNTA GORDA, FL 33950