

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000000599

FILED  
Mar 27, 2003  
Secretary of State

**Entity Name:** CHARLOTTE COUNTY COMMUNITY TENNIS ASSOCIATION, INC.

**Current Principal Place of Business:**

306 E. OLYMPIA AVE., P.O. BOX 510400  
PUNTA GORDA, FL 339510400

**New Principal Place of Business:**

**Current Mailing Address:**

306 E. OLYMPIA AVE., P.O. BOX 510400  
PUNTA GORDA, FL 339510400

**New Mailing Address:**

**FEI Number:** 65-1010699

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROONEY, J. MICHAEL ESQ.  
306 E. OLYMPIA AVE.  
PUNTA GORDA, FL 33950

**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: PRES ( ) Delete  
Name: KRAUSE, MICHELE  
Address: 2906 TAMiami TR.  
City-St-Zip: PUNTA GORDA, FL 33950

Title: D ( ) Delete  
Name: SHEPARD, SHELLEY  
Address: 12374 S.W. AUSTIN AVE  
City-St-Zip: LAKE SUZY, FL 34269

Title: ED ( ) Delete  
Name: BESSIRE, SUZIE  
Address: 2498 CELEBES COURT  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: TREA ( ) Delete  
Name: MCQUEEN, SHARON  
Address: P.O. BOX 510837  
City-St-Zip: PUNTA GORDA, FL 339510837

Title: D ( ) Delete  
Name: TAYLOR, KATHY  
Address: 1001 WEST MARION AVE., #4  
City-St-Zip: PUNTA GORDA, FL 66950

Title: D ( ) Delete  
Name: WETZEL, GAIL  
Address: P.O. BOX 2897  
City-St-Zip: PORT CHARLOTTE, FL 33949

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: DAVIS, DONN  
Address: 2128 CALCUTTA RD  
City-St-Zip: PUNTA GORDA, FL 33983

Title: SEC (X) Change ( ) Addition  
Name: ELAINE, PAPPAS  
Address: 604 BRINDISI COURT  
City-St-Zip: PUNTA GORDA, FL 33950

Title: ED (X) Change ( ) Addition  
Name: BESSIRE, SUSIE  
Address: 2498 CELEBES COURT  
City-St-Zip: PORT CHARLOTTE, FL 33948

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: SUSIE BESSIRE

ED

03/27/2003

Electronic Signature of Signing Officer or Director

Date