## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000000863

Title:

Name:

Address:

City-St-Zip:

Entity Name: TENNIS-4-EVERYONE, INC.

() Delete

SMITH, MIKE

862 BERKLEY DRIVE

PENSACOLA, FL 32503

FILED Feb 24, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 415 E INTENDENCIA ST 415 E INTENDENCIA ST PENSACOLA, FL 32501 PENSACOLA, FL 32502 **Current Mailing Address: New Mailing Address:** 415 E INTENDENCIA ST 415 E INTENDENCIA ST PENSACOLA, FL 32502 PENSACOLA, FL 32501 FEI Number: 59-3697411 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: CALKINS, RITA M CALKINS, RITA M 415 E INTENDENCIA ST 415 E INTENDENCIA ST PENSACOLA, FL 32501 US PENSACOLA, FL 32502 US 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: 02/24/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete CALKINS, RITA M CALKINS, RITA M Name: Name: Address: 415 E INTENDECIA ST Address: 415 E INTENDECIA ST City-St-Zip: PENSACOLA, FL 32501 City-St-Zip: PENSACOLA, FL 32502 Title: Title: () Change () Addition ( ) Delete WALKER, CYNTHIA Name: Name: Address: 2727 SCENIC HWY Address: City-St-Zip: PENSACOLA, FL 32503 City-St-Zip:

Title:

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: RITA CALKINS D 02/24/2004

(X) Change ( ) Addition

DOTSON, EDWARD

800 SHORELINE DRIVE

GULF BREEZE, FL 32561