

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008396

FILED
May 23, 2008
Secretary of State

Entity Name: POLK COUNTY TENNIS ASSOCIATION, INC.

Current Principal Place of Business:

1000 E. EDGEWOOD DR.
LAKELAND, FL 33803

New Principal Place of Business:

Current Mailing Address:

1000 E. EDGEWOOD DR.
LAKELAND, FL 33803

New Mailing Address:

FEI Number: 01-0631767 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BEERMAN, DAVE
1000 E. EDGEWOOD DR.
LAKELAND, FL 33803 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DURHAM, ANDY
Address: 202 WILEY DR.
City-St-Zip: AUBURNDALE, FL 33823

Title: D () Delete
Name: HOLLIS, ROBERT
Address: 929 LAKE HOLLINGSWORTH DR.
City-St-Zip: LAKELAND, FL 33803

Title: D () Delete
Name: MCCARDLE, JEFF
Address: 1099 CLUBHOUSE RD.
City-St-Zip: WINTER HAVEN, FL 33884

Title: D () Delete
Name: WARNEKE, TOMM
Address: 1600 GRASSLANDS BLVD.
City-St-Zip: LAKELAND, FL 33803

Title: D () Delete
Name: WOODARD, BOBBY
Address: 209 AVE F N.W.
City-St-Zip: WINTER HAVEN, FL 33881

Title: D () Delete
Name: BEERMAN, DAVE
Address: 1000 E. EDGEWOOD DR.
City-St-Zip: LAKELAND, FL 33803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 exemption stated in Chapter 119, 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: DAVE BEERMAN

PRES

05/23/2008

Electronic Signature of Signing Officer or Director

Date