

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004359

FILED
Apr 15, 2009
Secretary of State

Entity Name: UPPER KEYS TENNIS ASSOCIATION, INC.

Current Principal Place of Business:

600 ISLAND DRIVE
KEY LARGO, FL 33037

New Principal Place of Business:

4 JEW FISH AVE
KEY LARGO, FL 33037

Current Mailing Address:

600 ISLAND DRIVE
KEY LARGO, FL 33037

New Mailing Address:

4 JEW FISH AVE
KEY LARGO, FL 33037

FEI Number: 72-1527979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SASSANO, BOB
600 ISLAND DRIVE
KEY LARGO, FL 33037 US

Name and Address of New Registered Agent:

SASSANO, BOB
4 JEW FISH AVE
KEY LARGO, FL 33037 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:

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SASSANO, BOB D PRES
Address: 600 ISLAND DRIVE
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: REGELMANN, TERRI VP
Address: 50 BAHAMA AV
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: SHIRLEY, SASSANO A T RES
Address: 600 ISLAND DR
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SASSANO, BOB D PRES
Address: 4 JEW FISH AVE
City-St-Zip: KEY LARGO, FL 33037

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

Title: D (X) Change () Addition
Name: SHIRLEY, SASSANO A T RES
Address: 4 JEW FISH AVE
City-St-Zip: KEY LARGO, FL 33037

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: BOB SASSANO

PRES

04/15/2009

Electronic Signature of Signing Officer or Director

Date