## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N02000006905

FILED Sep 26, 2007 Secretary of State

Entity Name: MULTICULTURAL YOUTH TENNIS DEVELOPMENT FOUNDATION, INC.

	Principal Place of Business:	New Principal Place of Business:
82 GABLE WESTON	ES BLVD I, FL 33326	
Current P	Mailing Address:	New Mailing Address:
82 GABLE WESTON	ES BLVD I, FL 33326	
In accordai	r: 14-1845084 FEI Number Applied Fo nce with s. 607.193(2)(b), F.S., the corporati d Address of Current Registered Ag	on did not receive the prior notice.
WRIGHT, 82 GABLE	VICTOR L	
	e named entity submits this statement te of Florida.	for the purpose of changing its registered office or registered agent, or both,
SIGNATU	IRE: VICTOR L WRIGHT	
	Electronic Signature of Registe	ered Agent Date
OFFICER	Electronic Signature of Registers AND DIRECTORS:	ered Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
<b>OFFICER</b> Title: Name: Address: City-St-Zip:		-
Title: Name: Address: City-St-Zip: Title: Name: Address:	P () Delete WRIGHT, VICTOR L 82 GABLES BLVD	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  Title: ( ) Change ( ) Addition Name: Address:
Title: Name: Address:	P () Delete WRIGHT, VICTOR L 82 GABLES BLVD WESTON, FL 33326 SD () Delete BELL, VANESSA 82 GABLES BLVD	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  Title: ( ) Change ( ) Addition  Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition  Name: Address:
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address:	P () Delete WRIGHT, VICTOR L 82 GABLES BLVD WESTON, FL 33326  SD () Delete BELL, VANESSA 82 GABLES BLVD WESTON, FL 33326  D () Delete GOLD, DUSTIN 82 GABLES BLVD	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:

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: VICTOR L WRIGHT P 09/26/2007