

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006905

FILED  
Feb 02, 2009  
Secretary of State

**Entity Name:** MULTICULTURAL YOUTH TENNIS DEVELOPMENT FOUNDATION, INC.

**Current Principal Place of Business:**

82 GABLES BLVD  
WESTON, FL 33326

**New Principal Place of Business:**

7548 NOVA DR  
DAVIE, FL 33317

**Current Mailing Address:**

82 GABLES BLVD  
WESTON, FL 33326

**New Mailing Address:**

7548 NOVA DR  
DAVIE, FL 33317

**FEI Number:** 14-1845084

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WRIGHT, VICTOR L  
82 GABLES BLVD  
FORT LAUDERDALE, FL 33326 US

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

BARNES, DAMON L  
7548 NOVA DR  
DAVIE, FL 33326 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: DAMON BARNES III

02/02/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WRIGHT, VICTOR L  
Address: 82 GABLES BLVD  
City-St-Zip: WESTON, FL 33326

Title: SD ( ) Delete  
Name: BELL, VANESSA  
Address: 82 GABLES BLVD  
City-St-Zip: WESTON, FL 33326

Title: D ( ) Delete  
Name: GOLD, DUSTIN  
Address: 82 GABLES BLVD  
City-St-Zip: WESTON, FL 33326

Title: D ( ) Delete  
Name: STAFFORD, TOM  
Address: 82 GABLES BLVD  
City-St-Zip: WESTON, FL 33326

Title: D (X) Delete  
Name: BAKER, COLIN  
Address: 82 GABLES BLVD  
City-St-Zip: WESTON, FL 33326

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

Title: PRES (X) Change ( ) Addition  
Name: BARNES, DAMN L MR  
Address: 7548 NOVA DR  
City-St-Zip: DAVIE, FL 33317

Title: VP (X) Change ( ) Addition  
Name: UDAN, JENNIFER  
Address: 650 STANTON DR  
City-St-Zip: WESTON, FL 33326

Title: SECR (X) Change ( ) Addition  
Name: UDAN, MICHAEL  
Address: 650 STANTON DR  
City-St-Zip: WESTON, FL 33326

Title: TREA (X) Change ( ) Addition  
Name: FINKLESTEIN, EVAN  
Address: 1600 NW 128TH DR #306  
City-St-Zip: SUNRISE, FL 33323

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: DAMON BARNES III

PRES

02/02/2009

Electronic Signature of Signing Officer or Director

Date