

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002939

FILED  
Feb 02, 2005  
Secretary of State

Entity Name: USTA-FLORIDA SECTION FOUNDATION, INC.

## Current Principal Place of Business:

USA TENNIS FLORIDA ATTN:FOUNDATION PRES.  
1 DEUCE CT STE 100  
DAYTONA BCH, FL 32124

## New Principal Place of Business:

## Current Mailing Address:

USA TENNIS FLORIDA ATTN:FOUNDATION PRES.  
1 DEUCE CT STE 100  
DAYTONA BCH, FL 32124

## New Mailing Address:

FEI Number: 56-2443059

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BOIKA, BRUCE M  
80 SW 8TH STE 1920  
MIAMI, FL 33130 US

## Name and Address of New Registered Agent:

BOIKO, BRUCE M  
2525 PONCE DE LEON BLVD.  
SUITE 400  
MIAMI, FL 33134 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: BRUCE BOIKO

02/02/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: OD ( ) Change (X) Addition  
Name: MILLS, JEAN  
Address: 3555 LAKEVIEW DRIVE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: OD ( ) Change (X) Addition  
Name: CLEVELAND, DON  
Address: 1627 NORTH SWINTON DRIVE  
City-St-Zip: DELRAY BEACH, FL 33444

Title: OD ( ) Change (X) Addition  
Name: PARDON, RICK  
Address: 14438 SW 95TH TERRACE  
City-St-Zip: MIAMI, FL 33186

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: JEAN MILLS

OD

02/02/2005

Electronic Signature of Signing Officer or Director

Date