## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000002939

FILED Jul 25, 2006 Secretary of State

Entity Name: USTA-FLORIDA SECTION FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

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

Current Mailing Address: New Mailing Address:

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

FEI Number: 56-2443059 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:

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:

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Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: OD ( ) Delete Title: OD (X) Change ( ) Addition

 Name:
 MILLS, JEAN
 Name:
 MILLS, JEAN

 Address:
 3555 LAKEVIEW DRIVE
 Address:
 3555 LAKEVIEW BLVD

 City-St-Zip:
 DELRAY BEACH, FL 33445
 City-St-Zip:
 DELRAY BEACH, FL 33445

Title: OD ( ) Delete Title: OD (X) Change ( ) Addition

Name: CLEVELAND, DON Name: CLEVELAND, DON

Address: 1627 NORTH SWINTON DRIVE Address: 1627 NORTH SWINTON AVENUE City-St-Zip: DELRAY BEACH, FL 33444 City-St-Zip: DELRAY BEACH, FL 33444

Title: OD ( ) Delete Title: OD (X) Change ( ) Addition

Name: PARDON, RICK Name: MARIA, CERCONE

Address: 14438 SW 95TH TERRACE Address: 14298 82ND TERRACE NORTH

City-St-Zip: MIAMI, FL 33186 City-St-Zip: SEMINOLE, FL 33776

I hereby certify that the information supplied with this filing does not qualify for the 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: JEAN MILLS OD 07/25/2006