

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007308

FILED
Apr 15, 2009
Secretary of State

Entity Name: INTERNATIONAL CHRISTIAN TENNIS ASSOCIATION, INC.

Current Principal Place of Business:

92 FIELDSTONE LN.
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

PO BOX 350505
PALM COAST, FL 32135

New Mailing Address:

FEI Number: 20-0825895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PASCHAL, GARY S
92 FIELDSTONE LN.
PALM COAST, FL 32135 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PASCHAL, GARY S
Address: 92 FIELDSTONE LN.
City-St-Zip: PALM COAST, FL 32137

Title: D () Delete
Name: HOKE, RUSTY
Address: 90 FIELDSTONE LANE
City-St-Zip: PALM COAST, FL 32137

Title: D () Delete
Name: BECK, SUE
Address: 1121 N LITTLE SCHOOL RD
City-St-Zip: ARLINGTON, TX 76017

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: GARY S. PASCHAL

PRES

04/15/2009

Electronic Signature of Signing Officer or Director

Date