

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011446

FILED
Feb 26, 2009
Secretary of State

Entity Name: PALM COAST/FLAGLER FRIENDS OF TENNIS, INC.

Current Principal Place of Business:

79 LONGVIEW WAY
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

79 LONGVIEW WAY
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 20-3845702

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MITCHELL, THERESA D
79 LONGVIEW WAY
PALM COAST, FL 32137 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: DC () Delete
Name: HEPBURN, WILLIAM
Address: 19 COMMANDER CT
City-St-Zip: PALM COAST, FL 32137

Title: VCD () Delete
Name: SIEPIETOSKI, SANDRA
Address: 172 LOOKOUT DRIVE
City-St-Zip: FLAGLER BEACH, FL 32136

Title: SD () Delete
Name: WOLF, MARIE
Address: 80 OLD OAK DR
City-St-Zip: PALM COAST, FL 32137

Title: TD () Delete
Name: MITCHELL, THERESA D
Address: 79 LONGVIEW WAY
City-St-Zip: PALM COAST, FL 32137

Title: D () Delete
Name: BURNETT, ARLENE
Address: PO BOX 352671
City-St-Zip: PALM COAST, FL 32137

Title: D () Delete
Name: EVANS, MARGARET
Address: 8 BRISTOL LN
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC (X) Change () Addition
Name: WISS, TERRI
Address: 6 CROW COURT
City-St-Zip: PALM COAST, FL 32137

Title: VCD (X) Change () Addition
Name: BRODNAX, CLARENCE
Address: 45 COCHISE COURT
City-St-Zip: PALM COAST, FL 32137

Title: SD (X) Change () Addition
Name: MACEK, BELINDA
Address: 1 CARLSON COURT
City-St-Zip: PALM COAST, FL 32137

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HEPBURN, SHARON
Address: 19 COMMANDER COURT
City-St-Zip: PALM COAST, FL 32137

Title: D (X) Change () Addition
Name: LEIPFERT, BOB
Address: 26 WESTLEE LANE
City-St-Zip: PALM COAST, FL 32164

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: THERESA D. MITCHELL

TD

02/26/2009

Electronic Signature of Signing Officer or Director

Date