

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 23, 2009
Secretary of State**

DOCUMENT# N08000004203

Entity Name: VENOM TENNIS EDUCATION FOUNDATION, INC

Current Principal Place of Business:

926 W. THARPE ST
SUITE 3
TALLAHASSEE, FL 32303 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 38042
TALLAHASSEE, FL 32315 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOWERY, JERRELL
3110 OKEEHEEPKEE RD
TALLAHASSEE, FL 32303 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: P () Delete
Name: LOWERY, JERRELL
Address: 3110 OKEEHEEPKEE RD
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: VP () Delete
Name: UWAIBI, EMMANUEL
Address: 421 GAITHER DR
City-St-Zip: TALLAHASSEE, FL 32305 US

Title: SEC () Delete
Name: BOOTHE-THOMPSON, JUANITA
Address: 1126 RICHARDSON RD
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: TRES () Delete
Name: MORGAN-GATES, VICKIE L
Address: 2422 ROSEMARY TERRACE
City-St-Zip: TALLAHASSEE, FL 32303 US

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:

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: JERRELL LOWERY

P

03/23/2009

Electronic Signature of Signing Officer or Director

Date