

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009694

FILED
Sep 14, 2009
Secretary of State

Entity Name: THE JOHNSON MULTICULTURAL TENNIS CENTER, INC

Current Principal Place of Business:

1474 NW 46TH STREET
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

1474 NW 46TH STREET
MIAMI, FL 33142

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

JOHNSON, PAUL
1474 NW 46TH STREET
MIAMI, FL 33142 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JOHNSON, PAUL
Address: 1474 NW 46TH STREET
City-St-Zip: MIAMI, FL 33142

Title: C () Delete
Name: MARIUS, LEROY J
Address: 2371 NW 119 ST #204
City-St-Zip: MIAMI, FL 33167

Title: S () Delete
Name: JOHNSON, ERIC T
Address: 1474 NW 46TH STREET
City-St-Zip: MIAMI, FL 33142

Title: T () Delete
Name: THOMPkins, CHARLAYNE W
Address: 20001 NW 63RD AVE
City-St-Zip: MIAMI, FL 33015

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: LEROY MARIUS

CHAI

09/14/2009

Electronic Signature of Signing Officer or Director

Date