

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2008 8:00 am**  
**Secretary of State**

04-30-2008 90178 002 \*\*\*\*61.25

**DOCUMENT # N21150**

1. Entity Name  
**SPACE COAST TENNIS LEAGUE, INC.**



Principal Place of Business  
**PO BOX 410193  
MELBOURNE, FL 32941-0193 US**

Mailing Address  
**PO BOX 410193  
MELBOURNE, FL 32941-0193 US**

**60033199**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01112008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number  
**NOT APPLICABLE**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DILLON, TERRI  
4240 CAREYWOOD DRIVE  
MELBOURNE, FL 32934**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VD  
MEEHAN, PAT  
1974 SYKES CREEK DR.  
MERRITT ISLAND, FL 32953** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
DILLON, TERRI  
4240 CAREYWOOD DRIVE  
MELBOURNE, FL 32934** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**TD  
KIRCHER, JANICE C  
437 PENGUIN DRIVE  
SATELLITE BEACH, FL 32937** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
ROWAN, EDWIN  
343 PEREGRINE DRIVE  
INDIALANTIC, FL 32903** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Carol Wood  
582 Oceanside Blvd.  
Indialantic, FL 32903** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
STRAUB, KELLY  
839 KERRY DOWNS  
MELBOURNE, FL 32940** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Nancy Aumuller  
129 De Leon Road  
Rockledge, FL 32931** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SD  
LAU, GERRY  
2549 BERNICE CT.  
MELBOURNE, FL 32935** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Janice C. Kircher*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-08

Date

(321) 777-0255

Daytime Phone #

# ATTACHMENT

60033199

# N21150

Officer's and Directors (continued)

Barbara Wessner  
1193 Honeybee Lane  
Melbourne, FL 32940

Kathi Heller  
1890 Canterbury Drive  
Indialantic, FL 32903

Sandra Rowe  
1008 Monticello Court  
Melbourne, FL 32940

Patty Hammond  
675 Fountain Boulevard  
Satellite Beach, FL 32937

Annie MacLellan  
365 Kilmarnock Place  
Melbourne, FL 32940