

# N32935

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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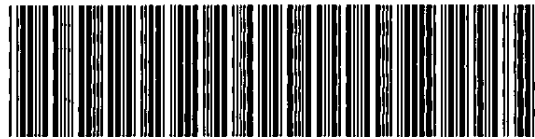
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**FLORIDA DEPARTMENT OF STATE**  
**Division of Corporations**

January 8, 2008

Sheila Bolin  
Tennis with a Different Swing, Inc.  
2301 Bryan  
Kissimmee, FL 34741

**SUBJECT: TENNIS WITH A DIFFERENT SWING, INC.**  
**Ref. Number: N32935**

We have received your document for TENNIS WITH A DIFFERENT SWING, INC. and check(s) totaling \$43.75. However, your check(s) and document are being returned for the following:

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6901.

Susan Payne  
Senior Section Administrator

Letter Number: 008A00001524

RECEIVED  
2008 FEB 12 AM 8:00  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: Articles of Dissolution Tennis With A Different Swing, Inc.

DOCUMENT NUMBER: N32935

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sheila Bolin - President / Registered Agent  
(Name of Contact Person)

Tennis With A Different Swing, Inc.  
(Firm/Company)

2301 Bryan  
(Address)

Kissimmee, FL 34741  
(City/State and Zip Code)

For further information concerning this matter, please call:

Sheila Bolin at ( 407 ) 931-6838  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee    ☒ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

### ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

Tennis With A Different Swing, Inc.

SECOND: The document number of the corporation (if known): N32935

THIRD: Adoption of Dissolution  
**(COMPLETE SECTION I OR II)**

#### SECTION I

If the corporation has members entitled to vote:

(CHECK/COMPLETE ONE)

☐ The date of the meeting of members at which the resolution to dissolve was adopted

\_\_\_\_\_. The number of votes cast by the members was sufficient for approval.

☒ The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes.

#### SECTION II

If the corporation has no members or members entitled to vote on the dissolution:

The corporation has no members or members entitled to vote on the dissolution.

The date of adoption of the resolution by the board of directors was Dec. 31, 2007

The number of directors in office was 5 and the vote for resolution was

5 for and 0 against. (must be a majority vote)

FOURTH: Effective date of dissolution if applicable: Jan. 1, 2008  
(no more than 90 days after dissolution file date)

Signature SBolin - President  
(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Shaila Bolin  
(Typed or printed name of the person signing)

President  
(Title of person signing)

**FILING FEE: \$35**