

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39102

FILED
Mar 12, 2008
Secretary of State

Entity Name: GREATER PENSACOLA TENNIS ASSOCIATION, INC.

Current Principal Place of Business:

% SHANER GARNER
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

% SHANER GARNER
1517 E BOBE ST
PENSACOLA, FL 32503 US

New Mailing Address:

FEI Number: 59-3067204 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GARNER, SHANER
1517 E BOBE ST
PENSACOLA, FL 32501 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: TD () Delete
Name: ENDACOTT, PAM
Address: 55 STAR LAKE DR
City-St-Zip: PENSACOLA, FL 32507

Title: PD () Delete
Name: GARNER, SHANER
Address: 1517 E BOBE ST
City-St-Zip: PENSACOLA, FL 32503

Title: D () Delete
Name: SCHWEIGERT, ADAM
Address: 619 PICKENS AVE
City-St-Zip: PENSACOLA, FL 32503

Title: D () Delete
Name: PALMER, RAY
Address: 101 WEST MAIN ST
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: BROCK, KATHLEEN
Address: 2007 E GADSDEN ST #101
City-St-Zip: PENSACOLA, FL 32501

Title: SD () Delete
Name: EINHART, NAN
Address: 5100 LEESWAY CIRCLE
City-St-Zip: PENSACOLA, FL 32504

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
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Address:
City-St-Zip:

Title: () Change () Addition
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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: NAN EINHART

SEC.

03/12/2008

Electronic Signature of Signing Officer or Director

Date