

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90029 048 ****70.00



DOCUMENT # N48056
1. Entity Name
GREATER VOLUSIA TENNIS LEAGUE, INC.

Principal Place of Business: **1501 RIDGEWOOD AVE. #210 HOLLY HILL FL 32117**
Mailing Address: **1501 RIDGEWOOD AVE. #210 HOLLY HILL FL 32117 US**



1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country

4. FEI Number **59-2012094**
Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent
**WILKES, JEAN DIR
1501 RIDGEWOOD AVE
#210
HOLLY HILL FL 32117**

7. Name and Address of New Registered Agent
Name: **MARILYN STEPHENS, DIRECTOR**
Street Address (P.O. Box Number is Not Acceptable): **1501 RIDGEWOOD AVE #210**
City: **HOLLY HILL, FL** Zip Code: **32117**

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: *Marilyn Stephens* DATE: **3/24/08**

Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when registering)

FILE NOW: 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

TITLE	PD	<input type="checkbox"/> Delete
NAME	HEATWOLE, GARY	
STREET ADDRESS	38 E. GRANADA BLVD.	
CITY-ST-ZIP	ORMOND BEACH FL 32176	
TITLE	VD	<input type="checkbox"/> Delete
NAME	SANDERS, MICHAEL	
STREET ADDRESS	1900 COUNTRY CLUB DR	
CITY-ST-ZIP	DAYTONA BCH FL 32114	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	KENNEDY, DOYLE	
STREET ADDRESS	414 MARY AVENUE, POB 1530	
CITY-ST-ZIP	NEW SMYRNA BEACH FL	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	HOLLIS, BETH	
STREET ADDRESS	737 FLORA ST.	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	COOPER, JERRY	
STREET ADDRESS	38 GARDEN DRIVE	
CITY-ST-ZIP	DELAND FL 32724	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	SEGREN, DONNA	
STREET ADDRESS	852 ESSEY RD.	
CITY-ST-ZIP	DAYTONA BEACH FL 32117	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHELIA PENCE	
STREET ADDRESS	2068 So. HALIFAX DR.	
CITY-ST-ZIP	DAYTONA BEACH, FL. 32118	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Marilyn Stephens* - **MARILYN STEPHENS, DIRECTOR** 3/24/08 386-677-6133