

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48056

FILED
Mar 17, 2009
Secretary of State

Entity Name: GREATER VOLUSIA TENNIS LEAGUE, INC.

Current Principal Place of Business:

1501 RIDGEWOOD AVE.
#210
HOLLY HILL, FL 32117

New Principal Place of Business:

830 E. 21ST AVE
NEW SMYRNA BEACH, FL 32169 US

Current Mailing Address:

1501 RIDGEWOOD AVE.
#210
HOLLY HILL, FL 32117 US

New Mailing Address:

P O BOX 97
NEW SMYRNA BEACH, FL 32170 US

FEI Number: 59-2012094

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STEPHENS, MARILYN DIR
1501 RIDGEWOOD AVE
#210
HOLLY HILL, FL 32117 US

Name and Address of New Registered Agent:

STEPHENS, MARILYN DIR
830 E. 21ST AVE.
NEW SMYRNA BEACH, FL 32169 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: MARILYN STEPHENS

03/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: PENCE, SHEILA
Address: 2068 S HALIFAX DR
City-St-Zip: DAYTONA BEACH, FL 32118

Title: VD () Delete
Name: SANDERS, MICHAEL
Address: 1900 COUNTRY CLUB DR
City-St-Zip: DAYTONA BCH, FL 32114

Title: TD () Delete
Name: COOPER, JERRY
Address: 38 GARDEN DRIVE
City-St-Zip: DELAND, FL 32724

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SEC (X) Change () Addition
Name: PENCE, SHEILA
Address: 2068 S HALIFAX DR
City-St-Zip: DAYTONA BEACH, FL 32118 US

Title: VPRE (X) Change () Addition
Name: SANDERS, MICHAEL
Address: 4 TWELVE OAKS TRAIL
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: TREA (X) Change () Addition
Name: COOPER, JERRY
Address: 38 GARDEN DRIVE
City-St-Zip: DELAND, FL 32724 US

Title: PRES () Change (X) Addition
Name: FISKE, BOB
Address: 3914 TANO DR.
City-St-Zip: ORMOND BEACH, FL 32174 US

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: MARILYN STEPHENS

DIRE

03/17/2009

Electronic Signature of Signing Officer or Director

Date