

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000158

FILED
May 08, 2009
Secretary of State

Entity Name: VEDADO TENNIS CLUB, INCORPORATED

Current Principal Place of Business:

9731 SW 20TH STREET
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

9731 SW 20TH STREET
MIAMI, FL 33165

New Mailing Address:

FEI Number: 65-0472820 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ALVAREZ, ELIZABETH T
9731 S.W. 20TH STREET
MIAMI, FL 33165 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: DP () Delete
Name: GUARDIOLA, FELIX
Address: 11010 SW 50 TER
City-St-Zip: MIAMI, FL 33165

Title: SD () Delete
Name: IRIONDO, SYLVIA GOUDIE
Address: 881 OCEAN DR 22B
City-St-Zip: KEY BISCAINE, FL 33149

Title: TD () Delete
Name: ALVAREZ, ELIZABETH T
Address: 9731 SW 20TH ST.
City-St-Zip: MIAMI, FL 33165

Title: VPD () Delete
Name: CARRILLO, JULIO
Address: 550 OCEAN DR #9H
City-St-Zip: KEY BISCAINE, FL 33149

Title: D (X) Delete
Name: BENACH, TERESA
Address: 550 OCEAN DR #3C
City-St-Zip: KEY BISCAINE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CARRILLO, JULIO
Address: 550 OCEAN DR. #9H
City-St-Zip: KEY BISCAINE, FL 33149

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: BENACH, TERESA
Address: 550 OCEAN DR. #3C
City-St-Zip: KEY BISCAINE, FL 33149

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: ELIZABETH TRELLES ALVAREZ

TD

05/08/2009

Electronic Signature of Signing Officer or Director

Date