2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001237

Entity Name: SUNCOAST TENNIS FOUNDATION, INC.

FILED Jaņ 2<u>0, 2</u>009 Secretary of State

cipal Place of Business:

3313 SAN CARLOS STREET CLEARWATER, FL 33759 US

Current Mailing Address: New Mailing Address:

6300 18TH ST NE ST PETERSBURG, FL 337024704 US

FEI Number: 59-3216936 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FOSTER, JUDY 3313 SAN CARLOS STREET CLEARWATER, FL 33759 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

WINSHIP, SUSAN FOELGNER, MARION Name: Name: Address: 1075 MARY JANE LN Address: 6300 18TH STREET NE

City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: ST PETERSBURG, FL 337024704

(X) Change () Addition Title: () Delete Title: Name: THARIN, IRENE Name: MASSEY, RONALD

Address: 846 PARK CT Address: 2446 PARKSTREAM AVENUE

City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: CLEARWATER, FL 33759

Title: () Delete Title: () Change () Addition

BROWN-EMERY, BARBARA Name: Name: 2714 WOODHAVEN CT Address: Address: City-St-Zip: CLEARWATER, FL 33761 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

Name: MASSEY, RON Name: MORGAN, NANCY 2285 GULF VIEW BLVD. Address: 2446 PARKSTREAM AVE Address: City-St-Zip: CLEARWATER, FL 33759 City-St-Zip: DUNEDIN, FL 34698

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: MARION FOELGNER Т 01/20/2009