FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9400006302 (3)

GAINESVILLE AREA TENNIS ORGANIZATION, INC.

Principal Plac	ce of Business	Mailing Address			
3666 N.W. 13T	TH PLACE	3666 N.W. 13TH PLACE			
GAINESVILLE		GAINESVILLE FL 32605			3. Date Incorporated or Qualified
					12/23/1994 4. FEI Number Applied For
					59-3288259 Not Applicable
2. Principal F	Place of Business	2a. Mailing Address			- ¢0.75
21		26			5. Certificate of Status Desired
Suite, Apt	. #, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be
22		27			Trust Fund Contribution
City & Sta	te	City & State			7. is this nonprofit corporation a homeowners association?
23		28	T .		☐ Yes ☐ No
Zip	Country	Zip	Country 30	4	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30,
24	9. Name and Address of Cun	29 rent Registered Agent	30		Personal Property Tax due June 30. Wes No 10. Name and Address of New Registered Agent
	9, 1141110 4114 / 1441 000 01 0411	on nogistores rigoric	81	Name	10, realistation of real highest of Figure
HALL, C	DAMID		<u></u>		
•	.W. 13TH PLACE		82	Street /	Address (P.O. Box Number is Not Acceptable)
	VILLE FL 32605		83		
W 111120	7122 1 2 32303		_		
			84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617.0	502 and 617.1508, Florida Statu	tes, the abov	e-named	
office or agent. I a	registered agent, or both, in the Sta am familiar with, and accept the ob	ate of Florida. Such change was ligations of, Section 617.0503. F	authorized by orlda Statute	y the corp s.	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE		•			
0.0	Signature, typed or printed name of registered				
				ent signature	required when reinstating) DATE
12.		AND DIRECTORS	13.	ent signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD		13. 1.1 TITLE	ent signature	•
TITLE NAME	PD HALL, DAVID W	AND DIRECTORS	13. 1.1 TITLE 1.2 NAME		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS	PD HALL, DAVID W 3666 NW 13TH STREET	AND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET	ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HALL, DAVID W 3666 NW 13TH STREET GAINESVILLE FL 32605	AND DIRECTORS	1.3. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5	ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
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14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information Indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

7 July 5 FL QUIRED

1/13/28 32-571-9400

FILED

Jan 22 1998 8:00am

Secretary of State