2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003091

FILED Juņ 02, 2<u>00</u>9 Secretary of State

Entity Name: GREATER VOLUSIA NETWORK TENNIS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1 DEUCE CORUT 1 DEUCE COURT

SUITE 200 SUITE 200

DAYTONA BEACH, FL 32124 DAYTONA BEACH, FL 32124

Current Mailing Address: New Mailing Address:

1 DEUCE CORUT 5 BARCELONA TRAIL

SUITE 200 ORMOND BEACH, FL 321744302 DAYTONA BEACH, FL 32124

FEI Number: 59-3604048 FEI Number Applied For () FEI Number Not Applicable ()

Certificate of Status Desired () 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: Name and Address of New Registered Agent:

BROWN, DAVE BROWN, DAVE

1 DEUCÉ COURT 711 PINÉ FOREST TRAIL EAST SUITE 200 PORT ORANGE, FL 32127 DAYTONA BEACH, FL 32124 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: DAVE BROWN 06/02/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition BROWN, DAVE BROWN, DAVE Name: Name:

1 DEUCE COURT, SUITE 200 Address: 711 PINE FOREST TRAIL EAST Address: City-St-Zip: DAYTONA BEACH, FL 32124 City-St-Zip: PORT ORANGE, FL 32127

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

KELLY, TOM Name: Name: Address: 66 SOUTH CENTER ST Address: City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip:

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

GLADSTONE, RITA Name: Name: 1705 CREEKWATER BLVD Address: Address: City-St-Zip: PORT ORANGE, FL 32128 City-St-Zip:

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

Name: DAVIDSON, JOAN Name: HARPER, PEGGY Address: 202 QUAY ASSISI Address: 5 BARCELONA TRAIL

City-St-Zip: NEW SMYRNA, FL 32169 City-St-Zip: ORMOND BEACH, FL 321744302

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: PEGGY HARPER TD 06/02/2009