


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90202 008 ***158.75

DOCUMENT # P02000135419
1. Entity Name
TENNIS MANAGEMENT SERVICES, INC.



DO NOT WRITE IN THIS SPACE

90008743

2. Principal Place of Business
15910 LISBON COURT
Suite, Apt. #, etc.

3. Mailing Address
15910 LISBON COURT
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State WELLINGTON FL
4. FEI Number 42-1566714
Applied For Not Applicable

Zip 33414 Country USA
5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name RICHARD L. STOCKTON, JR.
Street Address (P.O. Box Number is Not Acceptable) 15910 LISBON COURT
City WELLINGTON FL Zip 33414

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT RICHARD L. STOCKTON, JR. 15910 LISBON COURT WELLINGTON FL 33414-1075	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT JAIME DE CARVALHO 10 BOBERT PLACE BRONXVILLE NY 10708	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT, SECRETARY & TREASURER ELIZABETH A. STOCKTON 15910 LISBON COURT WELLINGTON FL 33414-1075	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard L. Stockton, Jr. Richard L. Stockton, Jr. 1/21/03 561-784-5887
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)