

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000132891

FILED
Jul 07, 2004
Secretary of State

Entity Name: MYRA KESSLER TENNIS CENTER INC.

Current Principal Place of Business:

1120 VILLAGES LAKES BLVD.
TENNIS CENTER
LEHIGH-ACRES, FL 33936 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1361
LEHIGH-ACRES, FL 33970 US

New Mailing Address:

FEI Number: 11-3702201

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PFUNER, JOHANN
1458 SCENIC ST
LEHIGH-ACRES, FL 33936 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GUERRIERO, SAVERIO
Address: 1304 COLUMBIAN DRIVE
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: VP () Delete
Name: PFUNER, JOHANN
Address: 1458 SCENIC ST
City-St-Zip: LEHIGH ACRES, FL 33936 US

Title: VP () Delete
Name: PFUNER, THOMAS
Address: 1452 SCENIC ST
City-St-Zip: LEHIGH-ACRES, FL 33936 US

Title: VP () Delete
Name: PFUNER, HEINZ
Address: 752 MIRROR LAKES DR.
City-St-Zip: LEHIGH ACRES, FL 33936 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HEINZ S. PFUNER

VP

07/07/2004

Electronic Signature of Signing Officer or Director

Date