

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000141158

Entity Name: M.D. TENNIS, INC.

FILED  
Feb 24, 2009  
Secretary of State

## Current Principal Place of Business:

8748 DANFORTH DR.  
WINDERMERE, FL 34786

## New Principal Place of Business:

3026 ANQUILLA AVE.  
CLERMONT, FL 34711

## Current Mailing Address:

8748 DANFORTH DR.  
WINDERMERE, FL 34786

## New Mailing Address:

3026 ANQUILLA AVE.  
CLERMONT, FL 34711

FEI Number: 20-1745698

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANDERSON, ANITA C  
849 HIGH POINTE CIRCLE  
MINNEOLA, FL 34711 US

## Name and Address of New Registered Agent:

ANDERSON, ANITA C  
849 HIGH POINTE CIRCLE  
MINNEOLA, FL 34711 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:

02/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: DUBLIN, MICHAEL  
Address: 3444 PONTIAC SREET  
City-St-Zip: LAKE CHARLES, LA 70605

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: DUBLIN, MICHAEL CRAIG  
Address: 3026 ANQUILLA AVE.  
City-St-Zip: CLERMONT, FL 34711

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL DUBLIN

DP

02/24/2009

Electronic Signature of Signing Officer or Director

Date