## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000063743

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

RUSKIN, FL 33570

WELCH, DAVID S

201 TRAVELERS WAY

ST PETERSBURG, FL

( ) Delete

Entity Name: WELCH TENNIS COURTS, INC.

## FILED Jan 07, 2008 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
4501 OLD SUN CITY,	US HSY 41 FL 33586	US				
Current Mailing Address:			New Maili	New Mailing Address:		
4501 OLD US HSY 41 PO BOX 7770 SUN CITY, FL 33586 US				P. O. BOX 7770 SUN CITY, FL 33586 US		
FEI Number:	59-3213747	FEI Number Applied For()	FEI Number Not Appl	licable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
2800-101 E	AKER LOOF	P & KENDRICK EDY BLVD 28TH FLOOR				
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:						
3.3		onic Signature of Registered Agent	t		 Date	
Election Can		ing Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D TODD, GEOR 10443 HERC RIVERVIEW,	N LAKE DR	Title: Name: Address: City-St-Zip:	TODD, GEOR	ON FLY LOOP	
Title: Name: Address: City-St-Zip:	DP TODD JR, GI 407 24TH AV RUSKIN, FL	Έ	Title: Name: Address: City-St-Zip:	(	)Change ()Addition	
Title: Name: Address: City-St-Zip:	DV SMITH, KRU: 4730 SANDP BIRMINGHAN	IPER LANE	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name: Address:	DST TODD, KARE 407 24TH AV		Title: Name: Address:	(	) Change ()Addition	

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.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

DV

WELCH, DAVID S

11685 PARKVIEW LANE

SEMINOLE, FL 33772

(X) Change ( ) Addition

SIGNATURE: GEORGE TODD JR. **PRES** 01/07/2008