FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1996	DIVISION OF CO	ORPORATIONS		
DOCUMENT # P(95000089685 (8)			
GOLD COAST TENNIS A	` '			
	ONDERN MO		I JARAHARI DIA HAIAL BIHAH ABURI ABI	N BANKI BANAN KAMB KAKIN BURAN KANAN BUNA KADA
Principal Place of Business	Mailing Address		-{	
8122 GLADES ROAD	8122 GLADES ROAD			
SUITE 269 BOCA RATON FL 33434	SUITE 269 BOCA RATON FL 33434			
			 Date Incorporated or Qualified 11/22/1995 	3a. Date of Last Report
2. Puncipal Place of Business	28. Mailing Address	24th St.	4. FEI Number () 20 1	Applied For
Suite, Apt. #, etc.	Suite, Apt. #, etc.	74° JT-	65-0000 17	Not Applicable
22	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Olray Beach	FL 28 Bixa Rate	m.FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
20 32411 Country	1(A - 22211211	Country	8. This corporation has liability fo	
9. Name and Addres	is of Current Registered Agent	10 USA		s 🗍 No
1		81 Name	ondo 62 No	11
#AU, LONDA S 8122 GLADES ROAD		82 Street Addr	ess (P.O. Box Number is Not Accepta	(ble)
SUITE 269		83	onw. Jum:	5T
BOCA RATON FL 33434		84 City		85 Zip Code
11. Pursuant to the provisions of Section	ns 607,0502 and 607,1508. Elorida Statutes 1	1 1 1/4/	a Katon	■1 コンスリスレノ
or registered agent, or both, in the S familiar with, and accept the obligati	ns 607.0502 and 607.1508, Florida Statutes, t State of Florida. Such change was authorized l ons of, Section;607.0505, Florida Statutes.	by the corporation's board	d of directors. I hereby accept the app	pointment/as registered agent. I am
SIGNATURE	A. Man			2/1/96
12. OF	FIGLES AND DIRECTORS	Hogistered Agent signature required 13.		FICERS AND DIRECTORS IN 12
NAME NAME NAME	DILETE	1 1 TITLE		FICERS AND DIRECTORS IN 12 Change Addition
NAME NAU, WILLIAM F STREET AMORESS 8122 GLADES ROA	D. #269 6406 NW 24th St	1.2 NAME 1.3 STREFT ADDRESS		
GOY-ST-ZIP BOCA RATON FL 3	3434	1.4 CITY - ST - ZIP		
MAME D NAU, LONDA S	☐ DELETE	2 1 TITLE 2 2 NAME		Change Addition
STREET ADDRESS 8122-GLADES ROA	D. #289 6406 NW 24th St	2.3 STREET ADDRESS		
CITY ST-ZIF BOCA RATON FL 3	3434	2 4 CITY - ST - ZIP		
NAME	☐ DELETE	3 1 TITLE 1		Change Addition
STRUCT ADDRESS		3.3 STREET ADDRESS		
GITY ST-7IP	T) DELETE	3.4 CITY - ST - ZIP 4.1 TITLE	<u> </u>	30246
NAME		42 NAME	-03/04/9601 ***200.00	028026 hange
STREET ADDITIONS		4.3 STREET ADDRESS		
OUA-21-3 b	DELETE	4.4 C/TY-ST-Z/P 5.1 TiTLE		Change Addition
NAMI	_	5 2 NAME		
STREET ADDRESS ONY STIZE		5 3 STREET ADDRESS		70
Tus	☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME		62 NAM(
STREEF ADORESS OUT - ST. ZIE		63 STREET ADDRESS		
14. I do hereby certify that the information certify that the information indicated a	n supplied with this filing is voluntarily furnished			
oath; that I am an officer or director a	on this annual report or supplemental annual in the corporation or the receiver or trustee emanged, or on an attainment with an address.			
/ /	Dedi 1 1 1 1.		2/2/01	la dan monte
SIGNATURE:	IND TYPED OR PRINTED NAME OF SIGNING OFFICER OF	DIRECTOR	4 1 1 1 1 Date	01-411- 18 11 Claytime Phone #