

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49977

Entity Name: TALLAHASSEE TENNIS ASSOCIATION, INC.**Current Principal Place of Business:**FOREST MEADOWS PARK
4950 N. MERIDIAN RD.
TALLAHASSEE, FL 32312**Current Mailing Address:**PO BOX 38414
TALLAHASSEE, FL 32315**FEI Number:** 59-3139981**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BAHORSKI, TOM
8527 YASHUNTAFUN RD
TALLAHASSEE, FL 32311 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	TREASURER
Name	BAHORSKI, TOM
Address	8527 YASHUNTAFUN RD
City-State-Zip:	TALLAHASSEE FL 32311

Title	PRESIDENT
Name	JAMES, SUE
Address	1110 LOMPOC COURT
City-State-Zip:	TALLAHASSEE FL 32317

Title	BOARD MEMBER
Name	KELLEY , DENNIS
Address	703 N. GADSDEN ST APT 4
City-State-Zip:	TALLAHASSEE FL 32303

Title	BOARD MEMBER
Name	KENDAL , CATHY
Address	4321 KIMBERLY CIRCLE
City-State-Zip:	TALLAHASSEE FL 32309

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TOM BAHORSKI

TREASURER

01/19/2017

Electronic Signature of Signing Officer/Director Detail_____
Date