

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000005895

**Entity Name:** GREATER PENSACOLA LADIES TENNIS LEAGUE, INC.**Current Principal Place of Business:**209 BAYSHORE DR  
PENSACOLA, FL 32507**Current Mailing Address:**209 BAYSHORE DR  
PENSACOLA, FL 32507 US**FEI Number:** 59-3441766**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GOYINS, JOSETTE  
209 BAYSHORE DR  
PENSACOLA, FL 32507 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:** JOSETTE GOYINS

02/23/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name STANFIELD, LINDA  
Address PO BOX 3671  
City-State-Zip: GULF SHORES AL 36547

Title 1VP  
Name HAACK, LAUREN  
Address 6120 MARIE DR  
City-State-Zip: GULF BREEZE FL 32563

Title 2VP  
Name HARDEN, CINDY  
Address 18632 CAPE FEAR BLVD  
City-State-Zip: FOLEY AL 36535

Title S  
Name DAVIES, SUSAN  
Address 1517 WHITE CAPS LN  
City-State-Zip: PENSACOLA FL 32507

Title T  
Name GOYINS, JOSETTE  
Address 209 BAYSHORE DR  
City-State-Zip: PENSACOLA FL 32507

Title 2VP  
Name JIMENEZ, HUNTLEY  
Address 8653 ROSEMONT DR  
City-State-Zip: PENSACOLA FL 32514

Title S  
Name BERRYMAN, LEIGH  
Address 6336 N BLUE ANGEL PKWY  
City-State-Zip: PENSACOLA FL 32526

*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:** LINDA STANFIELD

PRES

02/23/2017

Electronic Signature of Signing Officer/Director Detail

Date