

0301320.0117
1/30/03

Receipt Number: 1172299

File Number NS012213



CERTIFICATE_OF_INCORPORATION

For

ABERDEEN COMMUNITY TENNIS ASSOCIATION, INC.

Filed at the request of:

SIEGEL BARNETT & SCHUTZ, LLP
GREGG MAGERA
PO BOX 490
ABERDEEN SD 57402

State of South Dakota
Office of the Secretary of State

Filed in the office of the Secretary of State on: January 15, 2003

Chi Nelson

Secretary of State

Fee Received: \$20

State of South Dakota



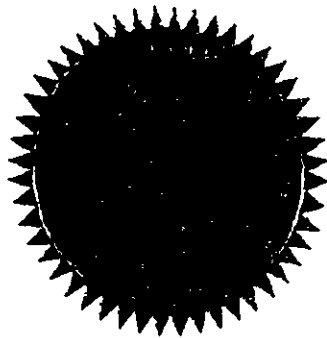
OFFICE OF THE SECRETARY OF STATE

Certificate of Incorporation Nonprofit Corporation

ORGANIZATIONAL ID #: NS012213

I, Chris Nelson, Secretary of State of the State of South Dakota, hereby certify that the Articles of Incorporation of **ABERDEEN COMMUNITY TENNIS ASSOCIATION, INC.** duly signed and verified, pursuant to the provisions of the South Dakota Corporation Act, have been received in this office and are found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I hereby issued this Certificate of Incorporation and attach hereto a duplicate of the Articles of Incorporation.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of South Dakota, at Pierre, the Capital, this January 15, 2003.

Chris Nelson

Chris Nelson
Secretary of State

0301326.0117
1/30/03

Filed this 15th day of Jan 2003
Chris Nelson
SECRETARY OF STATE

ARTICLES OF INCORPORATION
OF

ABERDEEN COMMUNITY TENNIS ASSOCIATION, INC.

Executed by the undersigned for the purpose of forming a South Dakota corporation under S.D.C.L. 47-28, South Dakota Nonprofit Corporation Act.

Article I

The name of the corporation is Aberdeen Community Tennis Association, Inc.

Article II

The corporation shall commence upon the filing of these Articles and shall continue perpetually or until such time as dissolved pursuant to law.

Article III

The corporation is organized exclusively for charitable, educational, religious, or scientific purposes within the meaning of Section 501(c) of the Internal Revenue Code and specifically for:

1. Promoting the physical fitness and well being of the youth and adults within the City of Aberdeen, South Dakota and the surrounding area through participation in the game of tennis.
2. Providing tennis opportunities for under-privileged youth through free participation in programs and tennis camp scholarships.
3. Developing low-cost tennis programs for youth and adults.
4. Supporting tennis activities for youth in school, after school and through interscholastic competition.
5. The corporation is organized exclusively for the promotion of social welfare within the meaning of Section 501(c)(3) of the Internal Revenue Code.
6. Notwithstanding anything herein to the contrary, the corporation shall exercise only such powers as are in furtherance of the exempt purposes of organizations set forth in Section 501(c) of the Internal Revenue Code and the regulations thereunder as the same now exist or as they may be hereafter amended from time to time.

RECEIVED

JAN 09 '03

S.D. SEC. OF STATE

RECEIVED

JAN 15 '03

S.D. SEC. OF STATE

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Article IV

The corporation will have one class of member which will consist of those persons who have paid their annual dues in such an amount as is established by the board of directors. Only those persons who have paid their annual dues shall be eligible to vote and participate in such meetings as shall be conducted by the association. The corporation shall be non-stock, and no dividends of pecuniary profits shall be declared or paid.

Article V

The directors shall be elected by the members of the corporation in such a manner as is established by the By-laws.

Article VI

The corporation shall adopt By-laws which shall govern its operation.

Article VII

The name of the corporation's initial registered agent is Gregg Magera, PO Box 490, Aberdeen, SD 57402-0490 *415 S Main St.*

Article VIII

The initial number of directors constituting the board of directors shall be nine. The term of office for the initial board of directors shall be until the first meeting of the corporation membership in the year 2003. The number of directors of the corporation may be established by the By-laws but in no event shall be less than three nor more than eleven. The names and addresses of the persons who are to serve as the initial directors are:

Donald J. Peck, 409 S. Kline Street, Aberdeen, SD 57401
Gregg C. Magera, 810 16th Ave. NE, Aberdeen, SD 57401
Lisa Link, 317 17th Ave. SW, Aberdeen, SD 57401
Diane Kost, 1303 N. Arch St., Aberdeen, SD 57401
Dave Vilhauer, 601 N. Kline St., Aberdeen, SD 57401
Leonard Suel, 1822 Eisenhower Circle, Aberdeen, SD 57401
Gene Morsching, 1511 17th Ave. SE, Aberdeen, SD 57401
Kerry Wenbourne, 1211 S. Lloyd St., Aberdeen, SD 57401
Judy Rezzatto, 1423 Squire Lane, Aberdeen, SD 57401

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Article IX

The names and addresses of the incorporators are:

Gregg Magera, 810 NE 16th Avenue, Aberdeen, SD 57401
Don Peck, 409 South Kline, Aberdeen, SD 57401
Kerry Wenbourne, 1211 South Lloyd, Aberdeen, SD 57401

Article X

These Articles may be amended by the board of directors adopting a resolution stating the amendment and an affirmative vote by a majority of the membership eligible to vote at either a special meeting or the annual meeting. A quorum of members must be present at such meeting.

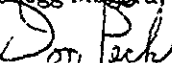
Article XI

Upon the dissolution of the corporation, the board of directors shall, after paying or making provisions for the payment of all the liabilities of the corporation, dispose of all the assets of the corporation exclusively for the purposes of the corporation in such a manner, or to such organization or organizations organized and operated exclusively for charitable, educational, religious or scientific purposes as shall at that time qualify as an exempt organization or organizations under Section 501(c)(3) of the Internal Revenue Code of 1986 or the corresponding provisions of any future United States Internal Revenue Law as the board of directors shall determine. Any such assets not so disposed of shall be disposed of by the Circuit Court of Brown County, South Dakota, exclusively for such purposes or to such organization or organizations as said court shall determine which are organized and operated exclusively for such purposes.

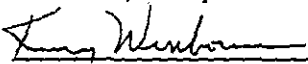
Executed this 7th day of January, 2003.



Gregg Magera, Incorporator



Don Peck, Incorporator



Kerry Wenbourne, Incorporator

0301320.0117
1/30/03

STATE OF SOUTH DAKOTA)
COUNTY OF BROWN) ss.
)

On this, the 7th day of January, 2003, before me, the undersigned officer, personally appeared Gregg Magera, known to me to be or satisfactorily proven to be the person whose name is subscribed to the within instrument and acknowledged that he executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

(Notarial Seal)

Linda J. Dykeman
Notary Public, South Dakota
My Commission Expires: 11/19/07

STATE OF SOUTH DAKOTA)
COUNTY OF BROWN) ss.
)

On this, the 7th day of January, 2003, before me, the undersigned officer, personally appeared Don Peck, known to me to be or satisfactorily proven to be the person whose name is subscribed to the within instrument and acknowledged that he executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

(Notarial Seal)

Linda J. Dykeman
Notary Public, South Dakota
My Commission Expires: 11/19/07

STATE OF SOUTH DAKOTA)
COUNTY OF BROWN) ss.
)

On this, the 7th day of January, 2003, before me, the undersigned officer, personally appeared Kerry Wenbourne, known to me to be or satisfactorily proven to be the person whose name is subscribed to the

0301320.0117
1/30/03

within instrument and acknowledged that he executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

(Notarial Seal)

Lois J. Dykema
Notary Public, South Dakota
My Commission Expires: 11/19/07

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, Gregg Magera, hereby give my consent to serve as the registered agent for Aberdeen Community Tennis Association, Inc.

Dated 1/7, 2003.

Gregg Magera
Gregg Magera

2004 NONPROFIT REPORT

PLEASE TYPE OR USE BLACK INK

FILING FEE: \$10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF \$25 APPLIES TO ALL LATE FILINGS

FILE DATE 2/30/04
RECEIPT NO. 1893939
RECEIVED

FEB 03 '04

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:



* NS012213 *
NS012213 JAN/0000

ABERDEEN COMMUNITY TENNIS ASSOCIATION, I
MAGERA, GREGG
415 S MAIN STREET
PO BOX 490
ABERDEEN SD 57402-0490

Day Time Phone # _____

Federal Taxp: _____

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

IF THE REGISTERED AGENT (CONTACT PERSON) AND/OR THE REGISTERED OFFICE ADDRESS HAS CHANGED FROM THAT LISTED ON THE MAILING LABEL ABOVE, THE STATEMENT OF CHANGE FORM IS REQUIRED TO BE COMPLETED.

2. The nature of the affairs which the corporation is conducting in South Dakota is promoting community tennis to youth and adults

3. A. The amount of property which the corporation is authorized to hold is unlimited or as set forth in the articles of incorporation.

B. The amount of property presently held by the corporation is \$ 0

* Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
<u>Y Don Peck</u>	<u>President</u>	<u>409 S. Kline St.</u>	<u>Aberdeen</u>	<u>SD</u>	<u>57401</u>
<u>Gregg C. Magera</u>	<u>Vice President</u>	<u>810 16th Ave. NE</u>	<u>Aberdeen</u>	<u>SD</u>	<u>57401</u>
<u>Lisa Link</u>	<u>Secretary</u>	<u>317 17th Ave. SW</u>	<u>Aberdeen</u>	<u>SD</u>	<u>57401</u>
<u>Diane Kost</u>	<u>Treasurer</u>	<u>1303 N. Arch St.</u>	<u>Aberdeen</u>	<u>SD</u>	<u>57401</u>

5. The names and addresses of directors (State law requires a minimum of three). If the directors and officers are the same individuals, please re-list them and their addresses. Attach an additional sheet if more space is needed to list directors.

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
<u>Dave Vilhauer</u>	<u>Director</u>	<u>601 N. Kline St.</u>	<u>Aberdeen</u>	<u>SD</u>	<u>57401</u>
<u>Leonard Suel</u>	<u>Director</u>	<u>1822 Eisenhower Circle</u>	<u>Aberdeen</u>	<u>SD</u>	<u>57401</u>
<u>Gene Morsching</u>	<u>Director</u>	<u>1511 17th Ave. SE</u>	<u>Aberdeen</u>	<u>SD</u>	<u>57401</u>

The report must be signed by the chairman of the board of directors, or its president, or any other officer in the presence of a notary public.

Dated 2-2-04

By Gregg C. Magera
(Signature)
Its Vice President
(Title)

STATE OF South Dakota

COUNTY OF Brown ss

On this the 2nd day of February, 20 04, before me, Kristi D. Sieler
personally appeared Gregg C. Magera, known to me, or proved to me,
to be the Vice President of the corporation that is described in and that executed the within
instrument and acknowledged to me that such corporation executed the same.

My Commission Expires 7-16-2009

(Notarial Seal)

Kristi D. Sieler
Notary Public

RETURN TO: SECRETARY OF STATE, 500 E. CAPITOL, PIERRE, S.D. 57501-5077
PHONE: 605-773-4845 FAX (605) 773-4550
www.sdsos.gov

nsar.pdf

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
Fax (605) 773-4550

**NON-PROFIT
STATEMENT OF CHANGE OF REGISTERED OFFICE
OR REGISTERED AGENT, OR BOTH**

FILING FEE: \$5 In addition to corporate report fee

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is _____
2. The previous street address, or a statement that there is no street address, or its registered office _____

ZIP _____
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. _____

ZIP _____
4. The name of its previous registered agent is _____
5. The name of its successor (current) registered agent is * _____

***The Consent of Registered Agent below must be completed by the new agent.**

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or by another of its officers in the presence of a notary of public.

Dated _____

(Signature) must be signed in the presence of a notary)

(Title)

STATE OF _____ ss
COUNTY OF _____

I, _____, a notary public, do hereby certify that on this _____ day
of _____, personally appeared before me _____
who, being by me first duly sworn, declared that he/she is the _____ of _____
_____ that he/she signed the foregoing document as officer of
the corporation, and the statements therein contained are true.

My Commission Expires _____

Notary Public

(Notarial Seal)

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, _____, hereby give my consent to serve as the
(name of registered agent)
registered agent for _____
(corporate name)

Dated _____

(signature of registered agent)

2005 NONPROFIT REPORT

PLEASE TYPE OR USE BLACK INK

FILING FEE: \$10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF \$25 APPLIES TO ALL LATE FILINGS

FILE DATE 01/10/05
RECEIPT NO. 1394451

RECEIVED

JAN 10 '05

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:



NS012213 JAN/2004

ABERDEEN COMMUNITY TENNIS ASSOCIATION, I
MAGERA, GREGG
415 S MAIN STREET
PO BOX 490
ABERDEEN SD 57402-0490

Day Time Phone #

Federal Taxps

FILING DATE: Due during the month the Certificate
of Incorporation was issued, and delinquent after
the last day of the following month.

IF THE REGISTERED AGENT (CONTACT PERSON) AND/OR THE REGISTERED OFFICE ADDRESS HAS CHANGED FROM THAT LISTED ON
THE MAILING LABEL ABOVE, THE STATEMENT OF CHANGE FORM IS REQUIRED TO BE COMPLETED.

2. The nature of the affairs which the corporation is conducting in South Dakota is Promoting community tennis to youth and adults

3. A. The amount of property which the corporation is authorized to hold is unlimited or as set forth in the articles of incorporation.

B. The amount of property presently held by the corporation is \$ 0
* Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
Don Peck	President	409 S. Kline St.	Aberdeen	SD	57401
Gregg C. Magera	Vice President	810 16th Ave. NE	Aberdeen	SD	57401
Lisa Link	Secretary	317 17th Ave. SW	Aberdeen	SD	57401
Diane Kost	Treasurer	1303 N. Arch St.	Aberdeen	SD	57401

5. The names and addresses of directors (State law requires a minimum of three). If the directors and officers are the same individuals, please re-list them and their addresses. Attach an additional sheet if more space is needed to list directors.

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
Dave Vilhauer	Director	601 N. Kline St.	Aberdeen	SD	57401
Leonard Suel	Director	1822 Eisenhower Circle	Aberdeen	SD	57401
Gene Morsching	Director	1511 17th Ave. SE	Aberdeen	SD	57401

The report must be signed by the chairman of the board of directors, or its president, or any other officer.

Dated 1-7-05

Gregg C. Magera
(Signature)

Vice president
(Title)

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
Fax (605) 773-4550

**NON-PROFIT
STATEMENT OF CHANGE OF REGISTERED OFFICE
OR REGISTERED AGENT, OR BOTH**

FILING FEE: \$5 In addition to corporate report fee

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is _____

2. The previous street address, or a statement that there is no street address, or its registered office _____
_____ ZIP _____
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. _____
_____ ZIP _____
4. The name of its previous registered agent is _____
5. The name of its successor (current) registered agent is * _____

***The Consent of Registered Agent below must be completed by the new agent.**

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or by another officer.

Dated _____

(Signature)

(Title)

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, _____, hereby give my consent to serve as the
(name of registered agent)

registered agent for _____
(corporate name)

Dated _____

(signature of registered agent)

244 1092 01/04/2006

2006 NONPROFIT REPORT

FILE DATE 01/01/06
RECEIPT NO. 1508284
DEC 23 2005
S.D. DEPT. OF STATE

PLEASE TYPE OR USE BLACK INK

FILING FEE: \$10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF \$25 APPLIES TO ALL LATE FILINGS

1. Corporate Name, Registered Agent and Registered Address:



NS012213 JAN/2005

ABERDEEN COMMUNITY TENNIS ASSOCIATION, I
MAGERA, GREGG
415 S MAIN STREET
PO BOX 490
ABERDEEN SD 57402-0490

Day Time Phone # _____

Federal Taxpa _____

FILING DATE: Due during the month the Certificate
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2. The nature of the affairs which the corporation is conducting in South Dakota is promoting community tennis to youth
and adults

3. A. The amount of property which the corporation is authorized to hold is unlimited or as set forth in the articles of incorporation.

B. The amount of property presently held by the corporation is \$ 0

* Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
Don Peck	President	409 S. Kline St.	Aberdeen	SD	57401
Gregg C. Magera	Vice President	1309 15th Ave N.E.	Aberdeen	SD	57401
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Diane Kost	Treasurer	1303 N. Arch St.	Aberdeen	SD	57401

5. The names and addresses of directors (State law requires a minimum of three). If the directors and officers are the same individuals, please re-list
them and their addresses. Attach an additional sheet if more space is needed to list directors.

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
Dave Vilhauer	Director	601 N. Kline St.	Aberdeen	SD	57401
Leonard Suel	Director	1822 Eisenhower Circle	Aberdeen	SD	57401
Gene Morsching	Director	1511 17th Ave. SE	Aberdeen	SD	57401

The report must be signed by the chairman of the board of directors, or its president, or any other officer.

Dated 12/22/05

(Signature)

Vice President

(Title)

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
Fax (605) 773-4550

**NON-PROFIT
STATEMENT OF CHANGE OF REGISTERED OFFICE
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_____ ZIP _____
4. The name of its previous registered agent is _____
5. The name of its successor (current) registered agent is * _____

***The Consent of Registered Agent below must be completed by the new agent.**

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or by another officer.

Dated _____

(Signature)

(Title)

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, _____, hereby give my consent to serve as the
(name of registered agent)

registered agent for _____
(corporate name)

Dated _____

(signature of registered agent)

257 3004 01/25/2007

2007 NONPROFIT REPORT

PLEASE TYPE OR USE BLACK INK

FILING FEE: \$10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF \$25 APPLIES TO ALL LATE FILINGS

FILE DATE 01/22/07
RECEIPT NO. 1636580
RECEIVED
JAN 22 2007
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:



NS012213 JAN/2006

ABERDEEN COMMUNITY TENNIS ASSOCIATION, I
MAGERA, GREGG
415 S MAIN STREET
PO BOX 490
ABERDEEN SD 57402-0490

Day Time Phone # _____

Federal Taxp# _____

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

IF THE REGISTERED AGENT (CONTACT PERSON) AND/OR THE REGISTERED OFFICE ADDRESS HAS CHANGED FROM THAT LISTED ON THE MAILING LABEL ABOVE, THE STATEMENT OF CHANGE FORM IS REQUIRED TO BE COMPLETED.

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B. The amount of property presently held by the corporation is \$ 0

* Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
☐ Don Peck	President	409 S. Kline St.	Aberdeen	SD	57401
☐ Gregg C. Magera	Vice President	1309 15th Ave. N.E.	Aberdeen	SD	57401
☐ Lisa Link	Secretary	317 17th Ave. S.W.	Aberdeen	SD	57401
☐ Diane Kost	Treasurer	1303 N. Arch St.	Aberdeen	SD	57401

5. The names and addresses of directors (State law requires a minimum of three). If the directors and officers are the same individuals, please check the box next to the person's name above. Attach an additional sheet if more space is needed to list directors.

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
☐ Dave Vilhauer	Director	601 N. Kline St.	Aberdeen	SD	57401
☐ Leonard Suel	Director	1822 Eisenhower Circle	Aberdeen	SD	57401
☐ Gene Morsching	Director	1511 17th Ave. SE	Aberdeen	SD	57401

The report must be signed by the chairman of the board of directors, or its president, or any other officer.

Dated 1/19/07

(Signature)

Vice President

(Title)

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
Fax (605) 773-4550

**NON-PROFIT
STATEMENT OF CHANGE OF REGISTERED OFFICE
OR REGISTERED AGENT, OR BOTH**

FILING FEE: \$5 In addition to corporate report fee

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_____ ZIP _____
4. The name of its previous registered agent is _____
5. The name of its successor (current) registered agent is * _____

***The Consent of Registered Agent below must be completed by the new agent.**

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or by another officer.

Dated _____

(Signature)

(Title)

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, _____, hereby give my consent to serve as the
(name of registered agent)
registered agent for _____
(corporate name)

Dated _____

(signature of registered agent)

2008 NONPROFIT REPORT

PLEASE TYPE OR USE BLACK INK

FILING FEE: \$10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF \$25 APPLIES TO ALL LATE FILINGS

FILE DATE 01/30/08
RECEIPT NO. 1760118
RECEIVED
JAN 30 2008
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:



* NS012213 *
NS012213 JAN/2007

ABERDEEN COMMUNITY TENNIS ASSOCIATION, I
MAGERA, GREGG
415 S MAIN STREET
PO BOX 490
ABERDEEN SD 57402-0490

Day Time Phone # _____

Federal Tax# _____

FILING DATE: Due during the month the Certificate
of Incorporation was issued, and delinquent after
the last day of the following month.

IF THE REGISTERED AGENT (CONTACT PERSON) AND/OR THE REGISTERED OFFICE ADDRESS HAS CHANGED FROM THAT LISTED ON
THE MAILING LABEL ABOVE, THE STATEMENT OF CHANGE FORM IS REQUIRED TO BE COMPLETED.

2. The nature of the affairs which the corporation is conducting in South Dakota is promoting community tennis to youth
and adults

3. A. The amount of property which the corporation is authorized to hold is unlimited or as set forth in the articles of incorporation.

B. The amount of property presently held by the corporation is \$ 0

* Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers:

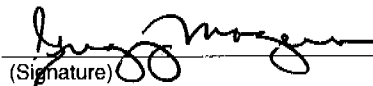
NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
☐ Don Peck	President	409 S. Kline St.	Aberdeen	SD	57401
☐ Gregg C. Magera	Vice President	1309 15th Ave. N.E.	Aberdeen	SD	57401
☐ Lisa Link	Secretary	317 17th Ave. S.W.	Aberdeen	SD	57401
☐ Diane Kost	Treasurer	1303 N. Arch St.	Aberdeen	SD	57401

5. The names and addresses of directors (State law requires a minimum of three). If the directors and officers are the same individuals, please check
the box next to the person's name above. Attach an additional sheet if more space is needed to list directors.

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
☐ Dave Vilhauer	Director	601 N. Kline Street	Aberdeen	SD	57401
☐ Leonard Suel	Director	1822 Eisenhower Circle	Aberdeen	SD	57401
☐ Gene Morsching	Director	1511 17th Ave. SE	Aberdeen	SD	57401

The report must be signed by the chairman of the board of directors, or its president, or any other officer.

Dated 1-29-08


(Signature)

Vice-President
(Title)

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
Fax (605) 773-4550

**NON-PROFIT
STATEMENT OF CHANGE OF REGISTERED OFFICE
OR REGISTERED AGENT, OR BOTH**

FILING FEE: \$5 In addition to corporate report fee

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is _____

2. The previous street address, or a statement that there is no street address, or its registered office _____
_____ ZIP _____
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. _____
_____ ZIP _____
4. The name of its previous registered agent is _____
5. The name of its successor (current) registered agent is * _____

***The Consent of Registered Agent below must be completed by the new agent.**

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or by another officer.

Dated _____

(Signature)

(Title)

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, _____, hereby give my consent to serve as the
(name of registered agent)

registered agent for _____
(corporate name)

Dated _____

(signature of registered agent)

2009

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

ANNUAL REPORT
DOMESTIC NONPROFIT

Please Type or Print Clearly in Ink

FILING FEE: \$10 Make check payable to SECRETARY OF STATE

FILE DATE

RECEIPT NO

RECEIVED

FEB 19 2009

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



NS012213 JAN/2008
ABERDEEN COMMUNITY TENNIS ASSOCIATION, I
MAGERA, GREGG
415 S MAIN STREET
PO BOX 490
ABERDEEN SD 57402-0490

Telephone #

FAX #

FILING DATE: Due during the month
the Certificate of Incorporation was
issued, and delinquent after the last
day of the following month.

2. The address of the principal executive office in or out of the State of South Dakota.

c/o Aberdeen Parks Recreation & Forestry

225 3rd Ave. SE

Aberdeen

SD

57401

Street Address

City

State

ZIP+4

Mailing Address (Optional)

City

State

ZIP+4

3. The name of the South Dakota Registered Agent Gregg Magera

415 S. Main St., PO Box 490

Aberdeen

SD

57402-0490

Street Address (Required to be a South Dakota Address)

City

State

ZIP+4

Mailing Address (Optional - Required to be a South Dakota Address)

City

State

ZIP+4

4. The names and business addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least three directors.

☐ Don Peck 409 S. Kline St. Aberdeen SD 57401
President Street Address City State ZIP+4

☐ Gregg C. Magera 1309 15th Ave. NE Aberdeen SD 57401
Vice President Street Address City State ZIP+4

☐ Lisa Link 317 17th Ave. SW Aberdeen SD 57401
Secretary Street Address City State ZIP+4

☐ Diane Kost 1303 N. Arch St. Aberdeen SD 57401
Treasurer Street Address City State ZIP+4

☐ Dave Vilhauer 601 N. Kline St. Aberdeen SD 57401
Director Street Address City State ZIP+4

☐ Leonard Suel 1822 Eisenhower Circle Aberdeen SD 57401
Director Street Address City State ZIP+4

☐ Gene Morsching 1511 17th Ave SE Aberdeen SD 57401
Director Street Address City State ZIP+4

Dated

(Signature of an authorized officer)

Gregg Magera

(Printed Name)

Vice President

(Title)

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

FILING FEE: \$10 Make check payable to SECRETARY OF STATE

The undersigned entity submits the following statement for purpose of changing its registered office and/or its registered agent in the State of South Dakota.

1. The name of the entity _____

2. The name of the registered agent on file _____

The name of the successor registered agent _____

3. If listing a Commercial Registered Agent, please state their identification number: _____

4. The address of the agent currently on file for this entity

Street Address (Required)	City	State	ZIP+4
---------------------------	------	-------	-------

Mailing Address (Optional)	City	State	ZIP+4
----------------------------	------	-------	-------

5. If the address has changed, its new address

Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
--	------	-------	-------

Mailing Address (Optional – Required to be a South Dakota Address)	City	State	ZIP+4
--	------	-------	-------

6. The address of its registered office and the address of the business office of its registered agent, as changed, must be identical.

Dated _____

(Signature of an authorized officer)

(Printed Name)

(Title)

2010

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

ANNUAL REPORT DOMESTIC NONPROFIT

Please Type or Print Clearly in Ink

FILING FEE: \$10 Make check payable to SECRETARY OF STATE

FILE DATE

01/01/10

RECEIPT NO

1976684

RECEIVED

DEC 10 2009

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



* NS012213 *

NS012213 JAN/2009

ABERDEEN COMMUNITY TENNIS ASSOCIATION, I
MAGERA, GREGG
415 S MAIN STREET
PO BOX 490
ABERDEEN SD 57402-0490

Telephone #

FAX #

FILING DATE: Due during the month
the Certificate of Incorporation was
issued, and delinquent after the last
day of the following month.

2. The address of the principal executive office in or out of the State of South Dakota.

c/o Aberdeen Parks Recreation & Forestry

225 3rd Av. SE

Aberdeen
CitySD 57401
State ZIP+4

Mailing Address (Optional)

City

State

ZIP+4

3. The name of the South Dakota Registered Agent Gregg Magera

415 S. Main St., PO Box 490

Aberdeen

SD 57401

Street Address (Required to be a South Dakota Address)

City

State

ZIP+4

Mailing Address (Optional - Required to be a South Dakota Address)

City

State

ZIP+4

4. The names and business addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least three directors.

☐	Don Peck	409 S. Kline St.	Aberdeen	SD	57401
	President	Street Address	City	State	ZIP+4
☐	Gregg C. Magera	1309 15th Ave. NE	Aberdeen	SD	57401
	Vice President	Street Address	City	State	ZIP+4
☐	Lisa Link	317 17th Ave. SW	Aberdeen	SD	57401
	Secretary	Street Address	City	State	ZIP+4
☐	Diane Kost	1303 N. Arch St.	Aberdeen	SD	57401
	Treasurer	Street Address	City	State	ZIP+4
☐	Dave Vilhauer	601 N. Kline St.	Aberdeen	SD	57401
	Director	Street Address	City	State	ZIP+4
☐	Leonard Suel	1822 Eisenhower Circle	Aberdeen	SD	57401
	Director	Street Address	City	State	ZIP+4
☐	Gene Morsching	1511 17th Ave. SE	Aberdeen	SD	57401
	Director	Street Address	City	State	ZIP+4

Dated



(Signature of an authorized officer)

Gregg Magera
(Printed Name)

Vice President
(Title)

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

FILING FEE: \$10 Make check payable to SECRETARY OF STATE

The undersigned entity submits the following statement for purpose of changing its registered office and/or its registered agent in the State of South Dakota.

1. The name of the entity _____

2. The name of the registered agent on file _____

The name of the successor registered agent _____

3. If listing a Commercial Registered Agent, please state their identification number: _____

4. The address of the agent currently on file for this entity

Street Address (Required)	City	State	ZIP+4
---------------------------	------	-------	-------

Mailing Address (Optional)	City	State	ZIP+4
----------------------------	------	-------	-------

5. If the address has changed, its new address

Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
--	------	-------	-------

Mailing Address (Optional – Required to be a South Dakota Address)	City	State	ZIP+4
--	------	-------	-------

6. The address of its registered office and the address of the business office of its registered agent, as changed, must be identical.

Dated _____

(Signature of an authorized officer)

(Printed Name)

(Title)

2011

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

ANNUAL REPORT DOMESTIC NONPROFIT

Please Type or Print Clearly in Ink

FILING FEE: \$10 Make check payable to SECRETARY OF STATE

FILE DATE 01/14/11
RECEIPT NO 2108488

RECEIVED

JAN 14 2011

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



NS012213 JAN/2010

ABERDEEN COMMUNITY TENNIS ASSOCIATION, I
MAGERA, GREGG
415 S MAIN STREET
PO BOX 490
ABERDEEN SD 57402-0490

Telephone # _____

FAX # _____

FILING DATE: Due during the month
the Certificate of Incorporation was
issued, and delinquent after the last
day of the following month.

2. The jurisdiction under whose law it is formed South Dakota

3. The address of the principal executive office in or out of the State of South Dakota.

c/o Aberdeen Parks Recreation & Forestry

225 3rd Ave. SE

Aberdeen

SD

57401

Street Address

City

State

ZIP+4

Mailing Address (Optional)

City

State

ZIP+4

4. The name of the South Dakota Registered Agent Gregg Magera

415 S. Main St., PO Box 490

Aberdeen

SD

57402-0490

Street Address or Rural Route Box Number in This State and

City

State

ZIP+4

Mailing Address in This State, if Different from Street Address

City

State

ZIP+4

5. The names and business addresses of its principal officers and directors. Please place a check mark next to the name
if the principal officer serves as a director. South Dakota Law requires at least three directors.

☐	Don Peck	409 S. Kline St.	Aberdeen	SD	57401
	President	Street Address	City	State	ZIP+4
☐	Gregg C. Magera	1309 15th Ave NE	Aberdeen	SD	57401
	Vice President	Street Address	City	State	ZIP+4
☐	Lisa Link	317 17th Ave. NE	Aberdeen	SD	57401
	Secretary	Street Address	City	State	ZIP+4
☐	Diane Kost	1303 N. Arch St.	Aberdeen	SD	57401
	Treasurer	Street Address	City	State	ZIP+4
☐	Dave Vilhauer	601 N. Kline St.	Aberdeen	SD	57401
	Director	Street Address	City	State	ZIP+4
☐	Leonard Suel	1822 Eisenhower Circle	Aberdeen	SD	57401
	Director	Street Address	City	State	ZIP+4
☐	Gene Morsching	1511 17th Ave. SE	Aberdeen	SD	57401
	Director	Street Address	City	State	ZIP+4

No person may execute this report knowing it is false in any material respect. Any violation is subject to a civil penalty.

Dated 1-13-2011

(Signature of an Authorized Person)

Gregg Magera
(Printed Name)

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

FILING FEE: \$10 Make check payable to SECRETARY OF STATE

The undersigned entity submits the following statement for purpose of changing its registered office and/or its registered agent in the State of South Dakota.

1. The name of the entity _____

2. The name of the registered agent on file _____

The name of the successor registered agent _____

3. If listing a Commercial Registered Agent, please state their identification number _____

4. The address of the agent currently on file for this entity

Street Address (Required)	City	State	ZIP+4
---------------------------	------	-------	-------

Mailing Address	City	State	ZIP+4
-----------------	------	-------	-------

5. If the address has changed, its new address

Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
--	------	-------	-------

Mailing Address in This State, if Different from Street Address	City	State	ZIP+4
---	------	-------	-------

6. The address of its registered office and the address of the business office of its registered agent, as changed, must be identical.

No person may execute this report knowing it is false in any material respect. Any violation is subject to a civil penalty.

Dated _____

(Signature of an Authorized Person)

(Printed Name)

2012

Enter Filing Year

ANNUAL REPORT

FILE DATE 01/12/2012

Secretary of State Office

500 E Capitol Ave

Pierre, SD 57501

(605)773-4845

DOMESTIC NONPROFIT

Please Type or Print Clearly In Ink

FILING FEE: \$10.00 Make check payable to SECRETARY OF STATE

RECEIPT NO 16772

1. Corporate Name and Address:

NS012213

ABERDEEN COMMUNITY TENNIS ASSOCIATION, INC.

C/O ABERDEEN PARKS RECREATION

ABERDEEN, SD 57401-4245

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

C/O ABERDEEN PARKS RECREATION

Street Address

ABERDEEN

City

SD

State

57401-4245

ZIP+4

225 3RD AVE SE

Mailing Address

ABERDEEN

City

SD

State

57401

ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name:

GREGG MAGERA

415 S MAIN STREET

Street Address or Rural Route Box Number in This State and

ABERDEEN

City

SD

State

57402-0490

ZIP+4

Mailing Address in This State, if Different from Street Address

City

State

ZIP+4

5. The names and business addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least three director.

☐

DON PECK

President

409 S. KLINE ST.

Street Address

ABERDEEN

City

SD

State

57401

ZIP+4

☐

GREGG C. MAGERA

Vice President

1309 15TH AVE. NE

Street Address

ABERDEEN

City

SD

State

57401

ZIP+4

☐

LISA LINK

Secretary

317 17TH AVE NE

Street Address

ABERDEEN

City

SD

State

57401

ZIP+4

☐

DIANE KOST

Treasurer

1303 N. ARCH ST

Street Address

ABERDEEN

City

SD

State

57401

ZIP+4

☐

DAVE VILHAUER

Director

601 N KLINE ST

Street Address

ABERDEEN

City

SD

State

57401

ZIP+4

☐

LEONARD SUEL

Director

1822 EISENHOWER CIRCLE

Street Address

ABERDEEN

City

SD

State

57401

ZIP+4

☐

GENE MORSCHING

Director

1511 17TH AVE SE

Street Address

ABERDEEN

City

SD

State

57401

ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.

By signing this form you agree to have both the fee and the form processed electronically.

Dated 01/12/2012

Signature Accepted Electronically

(Signature of an Authorized Person)

GREGG C MAGERA

(Printed Name)

2013

Enter Filing Year

ANNUAL REPORT

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

DOMESTIC NONPROFIT

Please Type or Print Clearly In Ink

FILING FEE: \$10.00 Make check payable to SECRETARY OF STATE

FILE 12/10/2012

RECEIPT NO 79577

1. Corporate Name and Address:

NS012213
ABERDEEN COMMUNITY TENNIS ASSOCIATION, INC.
C/O ABERDEEN PARKS RECREATION
ABERDEEN, SD 57401-4245

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

C/O ABERDEEN PARKS RECREATION	ABERDEEN	SD	57401-4245
Street Address	City	State	ZIP+4

Mailing Address	City	State	ZIP+4
-----------------	------	-------	-------

4. The name of the South Dakota Registered Agent

Agent Name: GREGG MAGERA

415 S MAIN STREET	ABERDEEN	SD	57402-0490
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4

Mailing Address in This State, if Different from Street Address	City	State	ZIP+4
---	------	-------	-------

5. The names and business addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least three director.

☐	DON PECK	409 S. KLINE ST.	ABERDEEN	SD	57401
	President	Street Address	City	State	ZIP+4
☐	GREGG C. MAGERA	1309 15TH AVE. NE	ABERDEEN	SD	57401
	Vice President	Street Address	City	State	ZIP+4
☐	LISA LINK	317 17TH AVE NE	ABERDEEN	SD	57401
	Secretary	Street Address	City	State	ZIP+4
☐	DIANE KOST	1303 N. ARCH ST	ABERDEEN	SD	57401
	Treasurer	Street Address	City	State	ZIP+4
☐	DAVE VILHAUER	601 N KLINE ST	ABERDEEN	SD	57401
	Director	Street Address	City	State	ZIP+4
☐	LEONARD SUEL	1822 EISENHOWER CIRCLE	ABERDEEN	SD	57401
	Director	Street Address	City	State	ZIP+4
☐	GENE MORSCHING	1511 17TH AVE SE	ABERDEEN	SD	57401
	Director	Street Address	City	State	ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.
By signing this form you agree to have both the fee and the form processed electronically.

Date 12/10/2012

Signature Accepted Electronically

(Signature of an Authorized Person)

GREGG C. MAGERA

(Printed Name)

2014

Enter Filing Year

ANNUAL REPORT

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

DOMESTIC NONPROFIT

Please Type or Print Clearly In Ink

FILING FEE: \$10.00 Make check payable to SECRETARY OF STATE

FILE 2/27/2014

RECEIPT NO 180279

1. Corporate Name and Address:

NS012213
ABERDEEN COMMUNITY TENNIS ASSOCIATION, INC.
C/O ABERDEEN PARKS RECREATION
ABERDEEN, SD 57401-4245

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

C/O ABERDEEN PARKS RECREATION	ABERDEEN	SD	57401-4245
Street Address	City	State	ZIP+4

Mailing Address	City	State	ZIP+4
-----------------	------	-------	-------

4. The name of the South Dakota Registered Agent

Agent Name: GREGG MAGERA

415 S MAIN STREET	ABERDEEN	SD	57402-0490
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4

Mailing Address in This State, if Different from Street Address	City	State	ZIP+4
---	------	-------	-------

5. The names and business addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least three director.

☐	DON PECK	409 S. KLINE ST.	ABERDEEN	SD	57401
	President	Street Address	City	State	ZIP+4
☐	GREGG C. MAGERA	1309 15TH AVE. NE	ABERDEEN	SD	57401
	Vice President	Street Address	City	State	ZIP+4
☐	LISA LINK	317 17TH AVE NE	ABERDEEN	SD	57401
	Secretary	Street Address	City	State	ZIP+4
☐	DIANE KOST	1303 N. ARCH ST	ABERDEEN	SD	57401
	Treasurer	Street Address	City	State	ZIP+4
☒	DAVE VILHAUER	601 N KLINE ST	ABERDEEN	SD	57401
	Director	Street Address	City	State	ZIP+4
☒	LEONARD SUEL	1822 EISENHOWER CIRCLE	ABERDEEN	SD	57401
	Director	Street Address	City	State	ZIP+4
☒	GENE MORSCHING	1511 17TH AVE SE	ABERDEEN	SD	57401
	Director	Street Address	City	State	ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.
By signing this form you agree to have both the fee and the form processed electronically.

Date 02/27/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

GREGG C MAGERA

(Printed Name)

2015

Enter Filing Year

ANNUAL REPORT

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

DOMESTIC NONPROFIT

Please Type or Print Clearly In Ink

FILING FEE: \$10.00 Make check payable to SECRETARY OF STATE

FILE DATE 3/4/2015

RECEIPT NO 279877

1. Corporate Name and Address:

NS012213
ABERDEEN COMMUNITY TENNIS ASSOCIATION, INC.
C/O ABERDEEN PARKS RECREATION 225 3RD AVE SE
ABERDEEN, SD 57401-4245

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

C/O ABERDEEN PARKS RECREATION 225 3RD AVE SE	ABERDEEN	SD	57401-4245
Street Address	City	State	ZIP+4

Mailing Address	City	State	ZIP+4
-----------------	------	-------	-------

4. The name of the South Dakota Registered Agent

Agent Name: GREGG MAGERA

415 S MAIN STREET	ABERDEEN	SD	57402-0490
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4

Mailing Address in This State, if Different from Street Address	City	State	ZIP+4
---	------	-------	-------

5. The names and business addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least three director.

☒	AARON KIESZ	38590 127TH ST	ABERDEEN	SD	57401
	President	Street Address	City	State	ZIP+4
☒	BRITTANY KONDA	323 S BOYD	ABERDEEN	SD	57401
	Vice President	Street Address	City	State	ZIP+4
☒	GREGG C. MAGERA	415 S MAIN SUITE 400	ABERDEEN	SD	57401
	Secretary	Street Address	City	State	ZIP+4
☒	JOHN VOGEL	303 S JAY ST	ABERDEEN	SD	57401
	Treasurer	Street Address	City	State	ZIP+4
☒	DON PECK	409 S KLINE ST	ABERDEEN	SD	57401
	Director	Street Address	City	State	ZIP+4
☒	ANDRZEJ DUSZENKO	922 1ST ST	ABERDEEN	SD	57401
	Director	Street Address	City	State	ZIP+4
☒	GENE MORSCHING	1511 17TH AVE SE	ABERDEEN	SD	57401
	Director	Street Address	City	State	ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.
By signing this form you agree to have both the fee and the form processed electronically.

Dated 03/04/2015

Signature Accepted Electronically

(Signature of an Authorized Person)

AARON KIESZ

(Printed Name)

2016

Enter Filing Year

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

ANNUAL REPORT

DOMESTIC NONPROFIT CORPORATIONS

SDCL 47-24-6; 59-11-24

Please Type or Print Clearly In Ink

FILING FEE: \$10.00 Make check payable to SECRETARY OF STATE

FILE DATE 1/8/2016

RECEIPT NO 368135

1. Corporate ID and Name:

NS012213

Enter Corporate ID

ABERDEEN COMMUNITY TENNIS ASSOCIATION, INC.

Enter Corporate Name

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

3. The address of the principal executive office (business address).

C/O ABERDEEN PARKS RECREATION 225 3RD AVE SE 225 ABERDEEN SD 57401-4245
3RD AVE SE

Actual Street Address or Rural Route Box Number City State ZIP+4

Mailing Address, if Different from Street Address City State ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: GREGG MAGERA

415 S MAIN STREET ABERDEEN SD 57402-0490

Actual Street Address or Rural Route Box Number in This State City State ZIP+4

Mailing Address in This State, if Different from Street Address City State ZIP+4

5. The names and addresses of its principal officers and directors (governors). South Dakota Law requires at least three directors.

☒	AARON KIESZ	38590 127TH ST	ABERDEEN	SD	57401
	President	Actual Street Address	City	State	ZIP+4

☒	BRITTANY KONDA	323 S BOYD	ABERDEEN	SD	57401
	Vice President	Actual Street Address	City	State	ZIP+4

☒	GREGG C. MAGERA	415 S MAIN SUITE 400	ABERDEEN	SD	57401
	Director	Actual Street Address	City	State	ZIP+4

☒	JOHN VOGEL	303 S JAY ST	ABERDEEN	SD	57401
	Treasurer	Actual Street Address	City	State	ZIP+4

☒	DON PECK	409 S KLINE ST	ABERDEEN	SD	57401
	Director	Actual Street Address	City	State	ZIP+4
☒	ANDRZEJ DUSZENKO	922 1ST ST	ABERDEEN	SD	57401
	Secretary	Actual Street Address	City	State	ZIP+4
☒	GENE MORSCHING	1511 17TH AVE SE	ABERDEEN	SD	57401
	Director	Actual Street Address	City	State	ZIP+4

6. Beneficial Interest (optional)

Owner	Description of Ownership	Percentage/Value
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No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty (SDCL 47-1A-129).

Dated

Signature Accepted Electronically
 (Signature of an Authorized Person)
 AARON KIESZ
 (Printed Name)