

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL-REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham,
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -2 AM 5:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N22082 (4)

1. Corporation Name

BOCA RATON SKI CLUB, INC.

Principal Place of Business

601 MAY POP
BOCA RATON FL 33486
US

Mailing Address

601 MAYPOP
BOCA RATON FL 33432
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/17/1987

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0036034

Applied For

Not Applicable

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for exchange tax under ss. 192.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HICKORY H R
601 MAY POP CT
BOCA RATON FL 33486

HR-Not HF
Maypop is
one word

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

H. Richard Hickory
Signature, typed or printed name of registered agent and fee if applicable

H. Richard Hickory
(NOTE: Registered Agent signature required when re-registering)

4-5-95
DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
PD	O'NEILL JIM	6060 AMBERWOOD DR BOCA RATON FL	
TD	HICKORY, H. R.	601 MAYPOP BOCA RATON FL	
SD	CHRISTIANSSEN SHARON	1194 HILLSBORO MILE #65 HILLSBORO BEACH FL	
D	DAX HAS	718 NW 5TH STREET BOCA RATON FL	
D	TUMAN MOLLY	50 SW THIRD AVE 312F BOCA RATON FL	
VPD	THOMPSON LINDA	10924 NW 12 COURT PLANTATION FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY - ST - ZIP
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

H. Richard Hickory
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-5-95
DATE

407 3956025
Daytime Phone #