FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # N35111 (6)

1. Corporation Name
SPACE COAST SKI CLUB, INC.

Principal Place of Business	Mailing Address
1901 S HARBOR CITY BLVD STE 705 MELBOURNE FL 32901 US	1901 S HARBOR CITY BLVD STE 705 MELBOURNE FL 32901 US

3. Date Incorporated or Qualified: 11/06/1989
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)

4. FEI Number: 59-2975240 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

9. **Name and Address of Current Registered Agent**

NICHOLAS, JAMES M.
1901 S HARBOR CITY BLVD
STE 705
MELBOURNE FL 32901

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE James M. Nicholas (JAMES M. NICHOLAS) REG. AGENT JAN 18, 1996
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	SCHMID, RICK		1.2 NAME		
STREET ADDRESS	623 CEDARSIDE WAY		1.3 STREET ADDRESS		
CITY-ST-ZIP	MELBOURNE FL		1.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	PEPIN, SUE		2.2 NAME		
STREET ADDRESS	57 ANCHOR DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	INDIAN HARBOR BEACH FL		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	DELUNA, ALAN		3.2 NAME		
STREET ADDRESS	2210 WOODLAWN CIRCLE		3.3 STREET ADDRESS		
CITY-ST-ZIP	MELBOURNE FL		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	LAWS, DENNIS		4.2 NAME		
STREET ADDRESS	7284 CHAPARAL DRIVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	MELBOURNE FL		4.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	5.1 TITLE	525 ISLAND COURT	☑ Change ☐ Addition
NAME	NICHOLAS, JAMES		5.2 NAME		
STREET ADDRESS	28 ANCHOR DR		5.3 STREET ADDRESS	INDIAN HARBOR BEACH,	
CITY-ST-ZIP	INDIAN HARBOR BEACH FL		5.4 CITY-ST-ZIP	FLA. 32937	
TITLE	T	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	SMOAK, LISA		6.2 NAME		
STREET ADDRESS	4115 WINDOVER WAY		6.3 STREET ADDRESS		
CITY-ST-ZIP	MELBOURNE FL		6.4 CITY-ST-ZIP		

CR2E037 (12/95)

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: James M. Nicholas SECRETARY 1/18/96 (407) 728-7325
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
JAMES M. NICHOLAS, SEC.