FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

FILED
Feb 02 1998 8:00am
Secretary of State

DOCUMENT # N35111 (6)

1. Corporation Name
SPACE COAST SKI CLUB, INC.

Principal Place of Business	Mailing Address
PO BOX 034107 INDIALANTIC FL 32903 US	PO BOX 034107 INDIALANTIC FL 32903 US

3. Date Incorporated or Qualified: 11/06/1989

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

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 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. Is this nonprofit corporation a homeowners association? ☐ Yes ☑ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

PEPIN, SUE
57 ANCHOR DR
INDIAN HARBOR BEACH FL 32937

10. Name and Address of New Registered Agent

81 Name: James M. Nicholas
82 Street Address (P.O. Box Number is Not Acceptable): 525 Island Court
83
84 City: Melbourne FL 85 Zip Code: 32937

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, ESQ 1/16/98
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	S	☐ DELETE	1.1 TITLE	2nd Vice President	☐ Change ☑ Addition
NAME	SCHMID, RICK		1.2 NAME	Lloyd Lewis	
STREET ADDRESS	623 CEDARSIDE WAY		1.3 STREET ADDRESS	675 Azalea Avenue	
CITY-ST-ZIP	MELBOURNE FL		1.4 CITY-ST-ZIP	Merritt Island, FL 32952	
TITLE	P	☑ DELETE	2.1 TITLE	Treasurer	☐ Change ☑ Addition
NAME	PEPIN, SUE		2.2 NAME	Pat Lewis	
STREET ADDRESS	57 ANCHOR DR		2.3 STREET ADDRESS	675 Azalea Avenue	
CITY-ST-ZIP	INDIAN HARBOR BEACH FL		2.4 CITY-ST-ZIP	Merritt Island, FL 32952	
TITLE	VP	☐ DELETE	3.1 TITLE	Director at Large	☐ Change ☑ Addition
NAME	STAUBUS, CAL		3.2 NAME	John Ehrig	
STREET ADDRESS	1406 CYPRESS TRACE DR		3.3 STREET ADDRESS	1080 Old Parsonage Dr.	
CITY-ST-ZIP	MELBOURNE FL		3.4 CITY-ST-ZIP	Merritt Island, FL 32952	
TITLE	D	☐ DELETE	4.1 TITLE	Director at Large	☐ Change ☑ Addition
NAME	LAWS, DENNIS		4.2 NAME	Dave Arnold	
STREET ADDRESS	7284 CHAPARAL DRIVE		4.3 STREET ADDRESS	2220 S. Front St., #404	
CITY-ST-ZIP	MELBOURNE FL		4.4 CITY-ST-ZIP	Melbourne, FL 32901	
TITLE	D	☐ DELETE	5.1 TITLE	Director at Large	☐ Change ☑ Addition
NAME	VARELA, MANUEL		5.2 NAME	Carole Varela	
STREET ADDRESS	197 MICANOPY CT		5.3 STREET ADDRESS	197 Micanopy Ct.	
CITY-ST-ZIP	INDIAN HARBOR BEACH FL		5.4 CITY-ST-ZIP	Indian Harbour Beach, FL 32937	
TITLE	T	☐ DELETE	6.1 TITLE	Director of Trips	☐ Change ☑ Addition
NAME	SMOAK, LISA		6.2 NAME	James M. Nicholas	
STREET ADDRESS	4115 WINDOVER WAY		6.3 STREET ADDRESS	525 Island Court	
CITY-ST-ZIP	MELBOURNE FL		6.4 CITY-ST-ZIP	Indian Harbour Beach, FL 32937	

CR2E037 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, ESQ 1/16/98 (407)773-2888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Telephone Number