

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N35111

1. Entity Name

SPACE COAST SKI CLUB, INC.

FILED
Jun 16, 2002 8:00 am
Secretary of State

05-15-2002 90025 037 ****61.25

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DO NOT WRITE IN THIS SPACE

Principal Place of Business PO BOX 034107 INDIALANTIC FL 32903 US		Mailing Address PO BOX 034107 INDIALANTIC FL 32903 US	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-2975240		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent NICHOLAS, JAMES M 525 ISLAND COURT MELBOURNE FL 32937		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
VP CONSTANTINO, CARLA 3083 RIO PINO N. INDIALANTIC FL 32903		TREASURER LAIRD QUENZLER 104 RIVERSIDE DR #401 COCOA FL 32922	
VP LEWIS, LLOYD 675 AZALEA AVE MERRITT ISLAND FL 32952	☒ Delete		☐ Change ☐ Addition
VP QUENZLER, CLAIRE N 104 RIVERSIDE DR. #401 COCOA FL 32922	☐ Delete		☐ Change ☐ Addition
D LAWS, DENNIS 7284 CHAPARAL DRIVE MELBOURNE FL	☐ Delete		☐ Change ☐ Addition
D VARELA, MANUEL 197 MICANOPY CT INDIAN HARBOR BEACH FL	☒ Delete		☐ Change ☐ Addition
D BARDELL, JUDY 1145 N. SHANNON AVE #14 INDIALANTIC FL 32903	☐ Delete	SECY CALVERT A. STAGBYS 1712 LONG PINE RD Melbourne FL 32940	☐ Change ☒ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/02 321-729-9744
 Date Daytime Phone #

CR2E037 (9/01)