

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35111

FILED
Apr 25, 2005
Secretary of State

Entity Name: SPACE COAST SKI CLUB, INC.

Current Principal Place of Business:

PO BOX 034107
INDIALANTIC, FL 32903 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 034107
INDIALANTIC, FL 32903 US

New Mailing Address:

FEI Number: 59-2975240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICHOLAS, JAMES M
525 ISLAND COURT
MELBOURNE, FL 32937 US

Name and Address of New Registered Agent:

NICHOLAS, JAMES M
1851 A1A
4303
INDIAN HARBOR BEACH, FL 32937 US

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:

04/25/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: CONSTANTINO, CARLA
Address: 3083 RIO PINO N.
City-St-Zip: INDIALANTIC, FL 32903

Title: TD () Delete
Name: QUENZLER, LAIRD
Address: 104 RIVERSIDE DR #401
City-St-Zip: COCOA, FL 32922

Title: P () Delete
Name: QUENZLER, CLAIRE N
Address: 104 RIVERSIDE DR. #401
City-St-Zip: COCOA, FL 32922

Title: D () Delete
Name: LAWS, DENNIS
Address: 7284 CHAPARAL DRIVE
City-St-Zip: MELBOURNE, FL

Title: SD (X) Delete
Name: STRYBYS, CALVERT A
Address: 1712 LONG PINE RD
City-St-Zip: MELBOURNE, FL 32940

Title: T (X) Delete
Name: BARDELL, JUDY
Address: 1145 N. SHANNON AVE #14
City-St-Zip: INDIALANTIC, FL 32903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CONSTANTINO, CARLA
Address: 4173 DEERWOOD TRAIL
City-St-Zip: MELBOURNE, FL 32934

Title: T (X) Change () Addition
Name: QUENZLER, LAIRD
Address: 104 RIVERSIDE DR #401
City-St-Zip: COCOA, FL 32922

Title: PP (X) Change () Addition
Name: QUENZLER, CLAIR N
Address: 104 RIVERSIDE DR. #401
City-St-Zip: COCOA, FL 32922

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAIRD QUENZLER

T

04/25/2005

Electronic Signature of Signing Officer or Director

Date