# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N35111

Apr 30, 2007 Secretary of State

Entity Name: SPACE COAST SKI CLUB, INC.

Current Principal Place of Business:	New Principal Place of Business:

PO BOX 034107 104 RIVERSIDE DR.

INDIALANTIC, FL 32903 US 401

COCOA, FL 32922 US

**Current Mailing Address: New Mailing Address:** 

PO BOX 034107 104 RIVERSIDE DR

INDIALANTIC, FL 32903 US 401

COCOA, FL 32922 US

FEI Number: 59-2975240 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

#### Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NICHOLAS, JAMES M 1851 A1A 4303

INDIAN HARBOR BEACH, FL 32937 US

**OFFICERS AND DIRECTORS:** 

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:

Date

# Electronic Signature of Registered Agent

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**PRES** () Change () Addition () Delete

CONSTANTINO, CARLA Name: Name: Address: 4173 DEERWOOD TRAIL Address: City-St-Zip: MELBOURNE, FL 32934 City-St-Zip:

Title: Title: ( ) Delete () Change () Addition

Name: QUENZLER, LAIRD Name: Address: 104 RIVERSIDE DR #401 Address: City-St-Zip: COCOA, FL 32922 City-St-Zip:

Title: () Delete Title: () Change () Addition

QUENZLER, CLAIR N Name: Name: 104 RIVERSIDE DR. #401 Address: Address: City-St-Zip: COCOA, FL 32922 City-St-Zip:

Title: ( ) Delete Title: (X) Change ( ) Addition

LAWS, DENNIS Name: Name: LLOYD, LEWIS 7284 CHAPARAL DRIVE Address: Address: 675 AZALEA AVE

City-St-Zip: MELBOURNE, FL City-St-Zip: MERRITT ISLAND, FL 32952

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 Τ 04/30/2007