2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 15, 2004 08:00 AM Secretary of State

DOCUMENT # N9300000562 1. Entity Name SOUTHERN REGION SHOW SKI ASSOCIATION, INC.					Sec	retary of State
Principal Plac 19100 FORF ODESSA, FL	REST DR	Mailing Address 19100 FORREST DR ODESSA, FL 33556 US				NIK BENG BERG BIKU NIKE NAMBU BU BER
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				01082004 4. FEI Numb 59-317	No Chg-NP	CR2E037 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required
STOUT, GARRY V 19100 FORREST DR ODESSA, FL 33556			DO NOT WRITE IN THIS SPACE			
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. I am familiar with, and accept the obligations of registered agent. Signature. Signature, typod or printed name of registered agent and the ill applicable (NOTE. Registered Agent segnature required when renetating) DATE Filling Fee is \$61.25 Due by May 1, 2004 9. Election Campaign Financing Added to Fees						
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIR PD BENNETT, ROGER 4656 E LAKE CIRCLE SARASOTA, FL 34232 VD BLAIS, PAUL 329 SEMINOLA BLVD CASSELBERRY, FL 32707	ECTORS			01/15/04-	0005467 -80054-003 61.25
TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP	STD STOUT, GARRY V 19100 FORREST DR ODESSA, FL 33556			•	NOT WI THIS SPA	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP						

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 truetage 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:

CRY STOUT 1/13/04 8/3-920-4616

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