2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 28, 2008 8:00 am Secretary of State

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1. Entity Name BOCÁ RATON SKI CLUB, INC. 40001103 Principal Place of Business Mailing Address 20964 AVENEL RUN 20964 AVENEL RUN BOCA RATON, FL 33428 US BOCA RATON, FL 33428 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04242008 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number 65-0036034 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GIDEON, BARBARA A 20964 AVENEL RUN Street Address (P.O. Box Number is Not Acceptable) BOCA RATON, FL 33428 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be Make check payable to Filing Fee is \$61.25 \$. Election Campaign Financing Trust Fund Contribution. \Box Florida Department of State Due by May 1, 2008 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE Addition NAME GIDEON, BARBARA A NAME STREET ADDRESS 20964 AVENEL RUN STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33428 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Channe Addition NAME RUBIN, JENAE NAME STREET ADDRESS 1730 SW 106 TER STREET ADDRESS **DAVIE, FL 33324** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition **BROOKS, STANLEY** NAME NAME 9357 WEST SAMPLE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 33065 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition MAGNA, ANTHONY NAME NAME STREET ADDRESS 12431 PLEASANT GREEN WAY STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33437 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME MURRAY, JOHN J NAME STREET ADDRESS 6900 BLUE BAY CIR STREET ADDRESS LAKE WORTH, FL 33467 CITY-ST-ZIP CITY-ST-ZIP TITLE D TITLE Delete ☐ Change ☐ Addition GOLDSTEIN, ART NAME NAME STREET ADDRESS 2403 BRIDGEWOOD DR STREET ADDRESS CITY-ST-7IP BOCA RATON, FL 33434 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

G OFFICER OR DIRECTOR