

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

1/23/08

FILED

Apr 14, 2008 08:00 AM
Secretary of State

DOCUMENT # 486949

1. Entity Name

TRAIL AND SKI SHOP INC.



Principal Place of Business

2748 CAPITAL CIRCLE NE
UNIT 103
TALLAHASSEE FL 32308
US

Mailing Address

2748 CAPITAL CIRCLE NE
UNIT 103
TALLAHASSEE FL 32308
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/07)

4. FEI Number 59-1561134

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GAYHARTT, JAMES CURTIS
2748 CAPITAL CIRCLE NE
UNIT 103
TALLAHASSEE FL 32308

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

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

(NOTE: Registered Agent signature required when removing agent)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PV
NAME GAYHARTT, JAMES
STREET ADDRESS 6655 CHEVY WAY
CITY-STATE-ZIP TALLAHASSEE, FL 00000

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
000000897220
04/25/08-80040-006 150.00

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CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 607, 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 fee empowered.

SIGNATURE:

James Gayhardt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES GAYHARTT 4/11/08 531-9001
Date Date of Filing