

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 558422 (2)

1. Corporation Name

SUNRISE ICE SKATING CENTER, INC.



Principal Place of Business

Mailing Address

~~2100 UNIVERSITY DRIVE~~
~~CORAL SPRINGS FL 33071~~

244 SOUTH

MILITARY TRAIL

~~2100 UNIVERSITY DRIVE~~
~~CORAL SPRINGS FL 33071~~

244 SOUTH

MILITARY TRAIL

DEERFIELD BEACH, FL 33442

DEERFIELD BEACH, FL 33442

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

01/27/1978

01/31/1995

4. FEI Number

59-1831841

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

GRABILL, RICHARD A.

2100 UNIVERSITY DRIVE

244 SOUTH MILITARY TRAIL

CORAL SPRINGS FL 33071

DEERFIELD BEACH, FL

33442

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person who is registered as agent, if applicable

Signature of Registered Agent, if not registered when reappointing

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

12.1 NAME
12.2 STREET ADDRESS
12.3 CITY-STATE-ZIP
12.4 TITLE
12.5 NAME
12.6 STREET ADDRESS
12.7 CITY-STATE-ZIP
12.8 TITLE
12.9 NAME
12.10 STREET ADDRESS
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12.12 TITLE
12.13 NAME
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12.95 CITY-STATE-ZIP
12.96 TITLE
12.97 NAME
12.98 STREET ADDRESS
12.99 CITY-STATE-ZIP
12.100 TITLE

PD
GRABILL, RICHARD A.
2100 UNIVERSITY DRIVE
CORAL SPRINGS FL
244 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL
33442

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

13.1 TITLE
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY-STATE-ZIP

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 or on an attachment to an address.

SIGNATURE:

R. Grabill
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/96

954-973-3421

CR2E034 (12/95)