





# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**REINSTATEMENT** 05

<b>DOCUMENT # 701179</b> 1. Entity Name <b>SARASOTA SKI-A-REES, INC.</b>						FILED SECRETARY OF STATE DIVISION OF CORPORATIONS  05 DEC 16 AM 11:36  600062226106 12/16/05--01043--009 **245.00  	
Principal Place of Business 104 CITY ISLAND ROAD SARASOTA, FL 34236-8493 US				Mailing Address PO BOX 1493 SARASOTA, FL 34230-1493 US			
2. Principal Place of Business Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
6. Name and Address of Current Registered Agent  <b>DITMARS, DANIEL L</b> <b>3543 CRYSTAL LAKES CT.</b> <b>SARASOTA, FL 34235</b>				7. Name and Address of New Registered Agent Name <b>PERRY JR T KENT</b> Street Address (P.O. Box Number is Not Acceptable) <b>11917 WHISTLING WAY</b> City <b>BRADENTON</b> <b>FL</b> Zip Code <b>34202</b>			
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  <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE <b>12/13/2005</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$236.25</b> <b>After January 1, 2006, Fee will be \$297.50</b>				<b>Make check payable to</b> <b>Florida Department of State</b>			
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BRUNNER, LARRY 2301 ROSELAWN ST. SARASOTA, FL 34231	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PERRY JR T KENT 11917 WHISTLING WAY BRADENTON, FL 34202	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PERRY, KENT 11917 WHISTLING WAY BRADENTON, FL 34202	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BLANTIN, LORI 1234 S. ALLENDALE AVE SARASOTA, FL 34239	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DITMARS, DANIEL L 3543 CRYSTAL LAKES ST SARASOTA, FL 34241	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T EUGENE STASIOWSKI 12016 WHISTLING WAY BRADENTON, FL 34202	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MOTE, SUSAN GOODE 2516 ARAPAHO ST. SARASOTA, FL 34231	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MASON, KIRK 4949 SILKWOOD DR SARASOTA, FL 34241	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBBINS, SANDY 2327 OAK TERR SARASOTA, FL 34231	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBBINS, LANCE 2327 OAK TERRACE SARASOTA, FL 34231	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PERRY, KELLY 11917 WHISTLING WY BRADENTON, FL 34202	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TRUDELL, CARL 4774 DEL SOL SARASOTA FL 34243	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
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 trustee 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.							
<b>SIGNATURE:</b>  <b>T KENT PERRY JR</b> <b>12/13/2005</b> <b>(407) 915-8454</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>							