

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 734228

**FILED**  
**Feb 15, 2010**  
**Secretary of State**

**Entity Name:** THE ICEHOUSE PLAYERS, INC.

**Current Principal Place of Business:**

1100 N UNSER ST.  
MOUNT DORA, FL 32757

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 759  
MOUNT DORA, FL 32756

**New Mailing Address:**

**FEI Number:** 59-6152541

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EFTA, GREG RA  
406 FOX VALLEY DRIVE  
LONGWOOD, FL 32779 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PTR  
Name: EFTA, GREG PTR  
Address: 406 FOX VALLEY DRIVE  
City-St-Zip: LONGWOOD, FL 32779 US

Title: VTR  
Name: DARST, Nanci VTR  
Address: 6033 FALCON BRIDGE PLACE  
City-St-Zip: MOUNT DORA, FL 32757 US

Title: TTR  
Name: ARO, BRENDA TTR  
Address: 701 LAKESHORE DRIVE  
City-St-Zip: EUSTIS, FL 32726 US

Title: STR  
Name: HOLLINGSWORTH, SHARLEE STR  
Address: 6962 LAKE OLA DRIVE  
City-St-Zip: MOUNT DORA, FL 32757 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GREG EFTA

PTR

02/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date