

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737886

FILED  
Apr 15, 2010  
Secretary of State

Entity Name: GATOR SNOW SKI CLUB, INC.

## Current Principal Place of Business:

1030 U.S. HIGHWAY ONE  
#205  
NORTH PALM BEACH, FL 33408 US

## New Principal Place of Business:

5162 LINTON BLVD  
SUITE 206  
DELRAY BEACH, FL 33484 US

## Current Mailing Address:

1030 U.S. HIGHWAY ONE  
#205  
NORTH PALM BEACH, FL 33408 US

## New Mailing Address:

5162 LINTON BLVD  
SUITE 206  
DELRAY BEACH, FL 33484 US

FEI Number: 59-2694593

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MITCHELL, BRUCE  
1030 U.S. HIGHWAY ONE  
#205  
NORTH PALM BEACH, FL 33408 US

## Name and Address of New Registered Agent:

HOLTZMAN, BRUCE  
5162 LINTON BLVD  
SUITE 206  
DELRAY BEACH, FL 33484 US

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: BRUCE HOLTZMAN

04/15/2010

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD  
Name: HOLTZMAN, BRUCE  
Address: 5162 LINTON BLVD  
City-St-Zip: DELRAY BEACH, FL 33484 US

Title: VP  
Name: NASH, JUNE  
Address: 9327 KEATING DRIVE  
City-St-Zip: LAKE PARK, FL 33410 US

Title: TD  
Name: HOGAN, JUDY  
Address: 2025 SW SILVERPINE WAY C-2  
City-St-Zip: PALM CITY, FL 34990 US

Title: VPD  
Name: CHALAIRE, DONALD  
Address: 7881 SE PARADISE DRIVE  
City-St-Zip: STUART, FL 34997 US

Title: SEC  
Name: GANZEL, ANN  
Address: 10155 ASPEN WAY  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: PPD  
Name: MITCHELL, BRUCE  
Address: 1030 U.S HIGHWAY ONE #205  
City-St-Zip: NORTH PALM BEACH, FL 33408 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: BRUCE HOLTZMAN

PRES

04/15/2010

Electronic Signature of Signing Officer or Director

Date