

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764169

FILED  
Apr 24, 2008  
Secretary of State

**Entity Name:** GATORLAND SKI CLUB OF NORTH CENTRAL FLORIDA, INC

**Current Principal Place of Business:**

7374 SUNRISE BLVD  
KEYSTONE HEIGHTS, FL 32656 US

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 432  
MELROSE, FL 32666 US

**New Mailing Address:**

**FEI Number:** 59-2415112

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REMBERT, THOMAS  
8469 LILLY LAKE ROAD  
MELROSE, FL 3262 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: D ( ) Delete  
Name: WINKLER, MELVIN  
Address: 8437 LILLY LAKE RD  
City-St-Zip: MELROSE, FL 32666

Title: D ( ) Delete  
Name: WINKLER, RICHARD  
Address: 925 NW 52 TERR.  
City-St-Zip: GAINESVILLE, FL

Title: D ( ) Delete  
Name: REMBERT, THOMAS  
Address: 8469 LILLY LAKE ROAD  
City-St-Zip: MELROSE, FL 32666

Title: D ( ) Delete  
Name: BANKS, WILLIAM  
Address: 8453 LILLY LAKE RD.  
City-St-Zip: MELROSE, FL 32666

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS REMBERT

D

04/24/2008

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

\_\_\_\_\_  
Date