

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90069 022 ***150.00

DOCUMENT # 845185

1. Entity Name
ICE FOLLIES AND HOLIDAY ON ICE, INC.



Principal Place of Business
**8607 WESTWOOD CENTER DRIVE
VIENNA, VA 22182**

Mailing Address
**8607 WESTWOOD CENTER DRIVE
TAX DEPT 3RD FLOOR
VIENNA, VA 22182**

40062255



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03012007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

52-1148565

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**UNITED STATES CORPORATION COMPANY
1201 HAYES ST STE 105
TALLAHASSEE, FL 32301**

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CCEO
FELD, KENNETH J.
9609 HALTER COURT
POTOMAC, MD** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VSD
SOWALSKY, JEROME S.
8613 CHATEAU DRIVE
POTOMAC, MD** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SRVT
LITTLE, MICHAEL
8607 WESTWOOD CENTER DR
VIENNA, VA 22182** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**AT
SENGLAUB, KEITH
8607 WESTWOOD CENTER DR
VIENNA, VA 22182** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**C/CEO/D
8607 Westwood Center Drive
Vienna, VA 22182** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EVP/S/D
8607 Westwood Center Drive
Vienna, VA 22182** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVP/T/D ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP/Controller/AT ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**President/COO/D
Shannon, Michael
8607 Westwood Center Drive
Vienna, VA 22182** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Keith Senglaub **Keith Senglaub** 4/5/07 703-749-5527
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #