

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****May 01, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # F00000004942**1. Entity Name  
**SNOWMARK CORPORATION**Principal Place of Business  
1013 CENTRE RD  
WILMINGTON DE 19805Mailing Address  
1013 CENTRE RD  
WILMINGTON DE 198052. Principal Place of Business  
3511 SILVERSIDE ROAD3. Mailing Address  
3511 SILVERSIDE ROADSuite, Apt. #, etc.  
SUITE 105Suite, Apt. #, etc.  
SUITE 105City & State  
WILMINGTON DECity & State  
WILMINGTON DEZip  
19810Country  
USZip  
19810Country  
US4. FEI Number  
**65-0819773**Applied For  
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent****HISEY WILLIAM S**  
2790 N FEDERAL HWY  
BOCA RATON FL 33431  
US**7. Name and Address of New Registered Agent**Name  
**VITELLO PHILIP E**  
Street Address (P.O. Box Number is Not Acceptable)  
**662 AZALEA LANE**  
City  
**VERO BEACH FL** Zip Code  
**32963**

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.

SIGNATURE **PHILIP E. VITELLO****05/01/2001**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees**11. OFFICERS AND DIRECTORS**TITLE  
NAME **D MARKOWICZ VICTOR** ☐ Delete  
STREET ADDRESS  
2584 NW 64TH BLVD  
CITY-ST-ZIP **BOCA RATON FL**TITLE  
NAME **D SNOWDEN GUY B** ☐ Delete  
STREET ADDRESS  
4080 IBIS POINT CIRCLE  
CITY-ST-ZIP **BOCA RATON FL**TITLE  
NAME **V HISEY WILLIAM S** ☐ Delete  
STREET ADDRESS  
2790 N FEDERAL HWY  
CITY-ST-ZIP **BOCA RATON FL**TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME **D SNOWDEN GUY B** ☒ Change ☐ Addition  
STREET ADDRESS  
5065 HIGHWAY A-1-A  
CITY-ST-ZIP **VERO BEACH FL 32963**TITLE  
NAME **P TAYLOR JOHN EJ.R.** ☒ Change ☐ Addition  
STREET ADDRESS  
5065 HIGHWAY A-1-A  
CITY-ST-ZIP **VERO BEACH FL 32963**TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: JOHN E. TAYLOR, JR.****P****05/01/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)