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PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F30613

(6)

THE CHRISTIAN FAMILY SKI SCHOOL, INC.

FILED Jan 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 2101 9TH ST SE 2101 9TH ST SE WINTER HAVEN FL 33880 WINTER HAVEN FL 33880 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/14/1981 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 26 Not Applicable 59-2252745 Suite, Apt. #, etc. Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. ☐ Yes 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CRITTENDEN, ROBERT R. 103 AVENUE A NW 82 Street Address (P.O. Box Number is Not Acceptable) WINTER HAVEN FL 33880 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if apply able (NOTE Hog stored Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 13.160 Addition HORRELL, WANDA J 1.2 NAME 2101 9TH ST SE STREET ADDRESS 1.3 STREET ADDRESS **WINTER HAVEN FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 211016 NAME HORRELL, FRED T. 22 NAME 2101 9TH ST SE STREET ADORESS 23 STREET ADDRESS **WINTER HAVEN FL** CITY-ST-ZIP 2 4 CHY+ST-ZIP DELETE Addition Change TITLE 3.1 THILE HORRELL, STEPHANIE 3.2 NAME 2101 9TH ST., S.E. STREET ADDRESS 3.3 STREET ADDRESS WINTER HAVEN FL CITY-ST-ZIP 34. CITY-SI-7IP DELETE Change Add-tion TITLE 4.1 1/1/16 NAME HORRELL, THOMAS 4.2 NAME 2101 9TH ST., S.E. STREET ADDRESS 4.3 STREET ADDRESS WINTER HAVEN FL CITY-ST-ZIP 4.4 CHIY - \$1 - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - \$1 - ZIP DELETE Addition TITLE 611011 NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. 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 annual report or supplemental annual 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachnight with an address.

MONATURE 2/2 Los March

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