

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000000699

1. Entity Name

INTRAWEST GOLF MANAGEMENT, INC.

**FILED**  
**Sep 18, 2000 8:00 am**  
**Secretary of State**

09-18-2000 90147 039 \*\*\*550.00

Principal Place of Business

2701 EAST CAMELBACK ROAD, STE 401  
PHOENIX AZ 85016

Mailing Address

2701 EAST CAMELBACK ROAD, STE 401  
PHOENIX AZ 85016

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

84-1465248

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

CT Corporation System  
Street Address (P.O. Box Number is Not Acceptable)  
1200 South Pine Island

City

Plantation

FL

Zip Code

33324

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

MARCIA J. Sunahara

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

Marcia J. Sunahara

(NOTE: Registered Agent signature required when reinstating)

9-13-00

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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	P	<input checked="" type="checkbox"/> Delete
NAME	HOUSSIAN, JOE S	
STREET ADDRESS	200 BURRARD STREET, STE 800	
CITY-ST-ZIP	VANCOUVER BC CANADA	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	RAYMOND, GARY L	
STREET ADDRESS	200 BURRARD STREET, STE 800	
CITY-ST-ZIP	VANCOUVER BC CANADA	
TITLE	V	<input type="checkbox"/> Delete
NAME	CURRIE, JOHN E	
STREET ADDRESS	200 BURRARD STREET, STE 800	
CITY-ST-ZIP	VANCOUVER BC CANADA	
TITLE	S	<input type="checkbox"/> Delete
NAME	MEACHER, ROSS J	
STREET ADDRESS	200 BURRARD STREET, STE 800	
CITY-ST-ZIP	VANCOUVER BC CANADA	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	HILL, DAVID A	
STREET ADDRESS	325 LAKE DILLON DRIVE	
CITY-ST-ZIP	DILLON CO	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	LIPPON, LARRY	
STREET ADDRESS	2701 EAST CAMELBACK RD., STE 401	
CITY-ST-ZIP	PHOENIX AZ	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Raymond, Gary L.	
STREET ADDRESS	200 Burrard Street, Ste 800	
CITY-ST-ZIP	Vancouver BC Canada V6L3B6	
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Onken, James F	
STREET ADDRESS	2701 East Camelback Rd., #401	
CITY-ST-ZIP	Phoenix, AZ 85016	
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Stipek, Jeff J.	
STREET ADDRESS	2701 East Camelback Rd., #401	
CITY-ST-ZIP	Phoenix, AZ 85016	
TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kleinkopf David D.	
STREET ADDRESS	1050 17th St. #1500	
CITY-ST-ZIP	Denver, CO 80265	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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:

David D. Kleinkopf

David D. Kleinkopf 9/13/00 303 6854800

Date

Daytime Phone #

CR2E034 (5/00)