

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 28, 2002 8:00 am**  
**Secretary of State**  
 02-28-2002 90051 023 \*\*\*150.00

**DOCUMENT # F99000000699**

1. Entity Name  
**INTRAWEST GOLF MANAGEMENT, INC.**

Principal Place of Business Mailing Address  
**14646 N.KIERLAND BLVD.#210** **14646 N.KIERLAND BLVD.#210**  
**SCOTTSDALE AZ 85254-2764** **SCOTTSDALE AZ 85254-2764**

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

**CT CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND**  
**PLANTATION FL 33324**

## 7. Name and Address of New Registered Agent

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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing ☐ **\$5.00** May Be  
 Trust Fund Contribution. Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE	VD	<input type="checkbox"/> Delete
NAME	STIPEC, JEFF J	
STREET ADDRESS	14646 N.KIERLAND BLVD.#210	
CITY-ST-ZIP	SCOTTSDALE AZ 85254-2764	
TITLE	PD	<input 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	VD	<input type="checkbox"/> Delete
NAME	ONKEN, JAMES E	
STREET ADDRESS	14646 N.KIERLAND BLVD #210	
CITY-ST-ZIP	SCOTTSDALE AZ 85254-2764	
TITLE	S	<input type="checkbox"/> Delete
NAME	MEACHER, ROSS J	
STREET ADDRESS	200 BURRARD STREET,STE 800	
CITY-ST-ZIP	VANCOUVER BC CANADA	
TITLE	V	<input type="checkbox"/> Delete
NAME	VERGURA, MICHAEL	
STREET ADDRESS	14646 N.KIERLAND BLVD.#210	
CITY-ST-ZIP	SCOTTSDALE AZ 85254-2764	

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kleinkopf David D	
STREET ADDRESS	1050 17th Street, Suite 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		
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: SIGNATURE OF David D. Kleinkopf 2/12/02 303-6854800  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Assistant Secretary Daytime Phone #

CR2E034 (9/01)

JACOBS  
CHASE  
FRICK  
KLEINKOPF  
&  
KELLEY

LLC

ATTORNEYS AT LAW

Attachment

DOC # F990000000699/  
5041828

SUE BARBER  
PARALEGAL  
892-4452

January 12, 2002

Division of Corporations  
Uniform Business Report  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

RE: Intrawest Golf Management, Inc. F990000000699

Dear Sir or Madam:

Enclosed please find the 2002 Uniform Business Report for the above referenced company along with the appropriate filing fee.

Please acknowledge receipt of the enclosed by stamping the enclosed copy of the report and returning it to me in the enclosed self addressed stamped envelope. Thank you for your cooperation.

Very truly yours,



Sue Barber

Encls.

INDEPENDENCE PLAZA  
1050 17th St.  
SUITE 1500  
DENVER, CO 80265  
303-685-4800  
FAX 303-685-4869