FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H92816

THE SKIING CENTER INC.

Principal Place of Business

Mailing Address

FILED May 11, 1999 8:00 am Secretary of State

05-11-1999 90039 007 ***150.00



40 SOUTH MAIN ST WINTER GARDEN FL 34787 US		9054 RON DEN LA WINDERMERE FL 34786 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/06/1986				
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number			Appl	ied For
21		26				59-2679354			Not /	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			75 Ad e Requ	ditional uired
22 City 9 State		City & State	City & State			6 Floris Commiss Financias				
City & State	:	28 28 28 28 28 28 28 28 28 28 28 28 28 2	¬ ´			Election Campaign Financing Trust Fund Contribution			. 00 M ded to	
Zip	Country 25	Zip 29 30	Country	у	8. This corporation owes the current year Intangible Personal Property Tax.			□No		
	Name and Address of Current Registered Agent					10. Name and Address of New R	egistered .	Agent		
			81	I N	lame					
FLECK, PETER 9054 RON DEN LANE				≥ S	treet Addres	ss (P.O. Box Number is Not Accepta	ble)			
WINDERMERE FL 34786			83	3						
			84	C	City		FL	85	Zip Co	de
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 applicable (NOTE Se	orstered Ana	ant sing	nature required v	when reinstating)	DATE			
12.	OFFICERS AND		13.	an orga	matare roquiles r	ADDITIONS/CHANGES TO OF		D DIRE	CTOR	S IN 12
TITLE	DP	☐ DELETE	1.1 TITLE					Cha		Addition
NAME	FLECK, PETER JOSEPH		1.2 NAME							
STREET ADDRESS	9054 RON DEN LANE		1.3 STREE	ET ADD	DRESS					
CITY-ST-ZIP	WINDERMERE FL 34786		1.4 CITY- S	ST-ZIP	,					
TITLE	VP	☐ DELETE	2.1 TITLE					Cha	nge	Addition
NAME	AARTSEN, EVERT		2.2 NAME							
STREET ADDRESS	9054 RON DEN LANE		2.3 STREE	ET ADO	DRESS					
CITY-ST-ZIP	WINDERMERE FL		2, 4 CITY-	ST-ZI	IP					
TITLE	VV 14 4 GP GGT 1171 Eq. V V V V	☐ DELETE	3.1 TITLE					☐ Cha	nge	Addition
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREE	T ADC	DRESS					
CITY-ST-ZIP			3.4, CITY-1	ST-ZIF	Р					
TITLE		☐ DELETE	4.1 TITLE					Cha	nge	Addition
NAME.			4. 2 NAME	:						
STREET ADDRESS			4.3 STREE	ET ADD	DRESS					
CITY-ST-ZIP			4.4 CITY-S							
TITLE	-	☐ DELETE	5.1 TITLE	<u> </u>				Cha	inge	Addition
NAME			5.2 NAME							1
STREET ADDRESS			53 STREE	ET ADD	DRESS					
CITY-ST-ZIP			54 CITY-8	ST-ZIF	P					
TITLE		☐ DELETE	6.1 TITLE					☐ Cha	inge	Addition
i			62 NAME					_	-	-
NAME			6.3 STREE		DRESS					
STREET ADDRESS			64 CITY S							

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 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 supplied 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 trustee 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 the attackment with an address, with all other like empowered.

SIGNATURE:

407. 876.6096