2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 25, 2005 8:00 am Secretary of State

Pincipal Place of Business 3. Mailing Address St. FERRAL HWY, BTH F. FT. LAUDERDALE, FL. 33301 St. FERRAL HWY, BTH F. FT. LAUDERDALE, FL. 33301 St. FERRAL HWY, BTH F. FT. LAUDERDALE, FL. 33301 St. FERRAL HWY, BTH F. FT. LAUDERDALE, FL. 33301 St. FERRAL HWY, BTH F. FT. LAUDERDALE, FL. 33301 St. FERRAL HWY, BTH FL. FT. LAUDERDALE, FL. 33316 St. FERRAL HWY, BTH FL. FT. LAUDERDALE, FL. 33316 St. FERRAL HWY, BTH FL. FT. LAUDERDALE, FL. 33316 St. FERRAL HWY, BTH FL. FT. LAUDERDALE, FL. 33316 St. FERRAL HWY, BTH FL. FT. LAUDERDALE, FL. 33316 St. FERRAL HWY, BTH FL. FT. LAUDERDALE, FL. 33316 St. FERRAL HWY, BTH FL. FT. LAUDERDALE, FL. 33316 St. FERRAL HWY, BTH FL. FT. LAUDERDALE, FL. 33316 St. FERRAL HWY, BTH FL. FT. LAUDERDALE, FL. 33316 St. FERRAL HWY, BTH FL. FT. LAUDERDALE, FL. 33316 St. FERRAL HWY, BTH FL. FT	DOCUMENT # N0000006376 1. Entity Name FORT LAUDERDALE SNOW SKI CLUB, INC.				04-	25-2005 90284 030) ****61.2	5	
Suite, Apt. #, etc. Suite, Apt. #, etc.	633 S. FEDERAL HWY., 8TH FL 633 S. FEDERAL					Pili Pālis Bezi Besis apsis Gērie ālis	81 (11) 18818 SIVI	M RI MARI	
Suite, Apt. #, etc. Suite, Apt. #, etc.	2. Principal Place of Business 3 Ms		3 Mailing Address						
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Special Country Zip Country Zip Country St. Certificate of Status Desired Sp. 75 Addition Fee Required Fee R	Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		g-NP CR2E03	7 (10/03)		
S. Certificate of Status Desired \$8,75 Additional Fee Required \$8,75 Additional Fee Requir	City & State		City & State	City & State		9			
SPAULDING WHITE, LINDA STORE Address of Current Registered Agent T. Name and Address of New Registered Agent	Zip	Country	Zip	Country	5. Certificate of Sta		\$8.75 Additi		
SPAULDING WHITE, LINDA 63 S. FEDERAL HWY., 8TH FL FT. LAUDERDALE, FL 33301 City City FL 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 Riorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Filling Fee is \$61.25 Due by May 1, 2005 Filling Fee is \$61.25 Due by May 1, 2005 OFFICERS AND DIRECTORS 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TILE FILL JIR, ROBERT STRET ADDRESS OITY-S1-2P FORT LAUDERDALE, FL 33334 FT. LAUDERDALE, FL 333316 OITY-S1-2P TILE VPD Detel TILE De		6. Name and Address of Current Re	egistered Agent		7. Name and Addr		· · · · · · · · · · · · · · · · · · ·		
Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	SPAULDING WHITE LINDA			Name _					
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Symbol provided name of registered agent and life if applicable. (NOTE Registered Agent agonature required who recreation) DATE	633 S. FEDERAL HWY., 8TH FL			Street Addr	ess (P.O. Box Number is N	lot Acceptable)			
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, hypes or ported name of registered agent and itself applicable.	, , , , , , , , ,	5/15/122, 7 2 33301							
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Thereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.0 (3)(i). Florida Statutes, 1 furner 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

GNATURE:

Suchature AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

SIGNATURE:

Linda Spaulding

951) 462-5500