

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005228

FILED  
Jun 06, 2006  
Secretary of State

Entity Name: TAMPA BAY SNOW SKIERS, INC.

## Current Principal Place of Business:

7015 ARMENIA AVE N  
TAMPA, FL 33604 US

## New Principal Place of Business:

14805 N FLORIDA AVE.  
SUITE A  
TAMPA, FL 33613 US

## Current Mailing Address:

PO BOX 25144  
TAMPA, FL 336225144 US

## New Mailing Address:

FEI Number: 59-1710097      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

BAY AREA ACCOUNTING-PHILLIP REID CPA  
7015 ARMENIA AVE N  
TAMPA, FL 33604 US

## Name and Address of New Registered Agent:

BAY AREA ACCOUNTING-PHILLIP REID CPA  
14805 N FLORIDA AVE  
SUITE B  
TAMPA, FL 33613 US

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: \_\_\_\_\_

06/06/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MOUMNE, TOUFIC  
Address: 9909 WOODBAY DRIVE  
City-St-Zip: TAMPA, FL 33626

Title: VPD ( ) Delete  
Name: HOUSEWRIGHT, PATTIE  
Address: 10008 BENTLEY WAY  
City-St-Zip: TAMPA, FL 33626

Title: TD ( ) Delete  
Name: NELSON, BARBARA  
Address: 4009 PRIORY CIRCLE  
City-St-Zip: TAMPA, FL 33618

Title: SD ( ) Delete  
Name: HARL, TERRY  
Address: 4416 W IDLEWILD AVE  
City-St-Zip: TAMPA, FL 33614

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: HOUSEWRIGHT, PATTIE  
Address: 10008 BENTLEY WAY  
City-St-Zip: TAMPA, FL 33626

Title: VPD (X) Change ( ) Addition  
Name: HANDLEY, BILL  
Address: 8914 EAGLE WATCH DRIVE  
City-St-Zip: RIVERVIEW, FL 33569

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: SMITH, LYNN  
Address: 1104 SAMY DRIVE  
City-St-Zip: TAMPA, FL 33613

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LYNN SMITH

SD

06/06/2006

Electronic Signature of Signing Officer or Director

Date