FILE NOW: FILING FEE IS \$61.25

'NONPROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mor am 🕝

,	JAL REPORT 1996	7.7	ary of Silvis CORPORATIONS		
1. Corporation	n Name	0005229 (0)		
TAMPA	BAY ALPINE SKI CLUB, INC	C.		 	
Principal Place	e of Business	Mailing Address		T I DO DISTRICTURA DE DE LA CONTRACTOR D	
3314 HENDERSON BLVD.		PO BOX 2438			
STE. 205 TAMPA FL 33609		STE. 205 TASMPA FL 33601			
IAMEN IL SO		US		3. Date Incorporated or Qualified 11/11/1993	3a. Date of Last Report 07/13/1995
21 Z08	S. MACOILL AUE	2a. Mailing Address 26		4. FEI Number NOT APPLICABLE	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	9	City & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
23 TAM	PA FL	28 TAMPA	FC	Trust Fund Contribution	Added to Fees
Zip 334	Country	Zip 3360/	Country	8. This corporation has liability for int.	
24 236	9, Name and Address of Current	<u> </u>	[30]	Florida Statutes [] 10. Name and Address of New Rec	Yes XNo
			81 Name	10. Hamo dira Addidad di Non Ha	HOLOLOG PISOLIC
SINGLET	ON, MARCY R CPA		82 Street Add	lress (P.O. Box Number is Not Acceptable)	
	NDERSON BLVD.		208	S MACOILL ALE	STE B
STE. 205			83		
TAMPA F	-L 33609		84 City	4	FL 85 Zip Code 3.36 95
11 Purseant t	to the provisions of Sections 617 0502	and 617 1508 Florida Statute	84 City TA	ration submits this statement for the purpo	FL 336 as
or register	red agent, or both, in the State of Florida ith, and accept the obligations of, Section	 Such change was authorize 	ed by the corporation's boa	and of directors. Thereby accept the appoint	itment as registered agent. I am
railinai wi	ini, and accept the obligations of, section				
SIGNATURE		in o m.0000, norida otatutes			
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable (NO	ITE Registered Agent signature require		DATE
12.	OFFICERS AND	nd title if applicable (NO DIRECTORS	TE Registered Agent signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
12. TITLE	OFFICERS AND	nd title if applicable (NO	TE Rogistered Agent signature required	ADDITIONS/CHANGES TO OFFICE PLES/OFNT D	
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appears in Block 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE: 《