

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N94000004334

FILED
Apr 30, 2003
Secretary of State

Entity Name: CITRUS FIGURE SKATING CLUB, INC.

Current Principal Place of Business:

THE ICE FACTORY
2221 PARTIN SETTLEMENT RD
KISSIMMEE, FL 34744 US

New Principal Place of Business:

Current Mailing Address:

7338 WOODBRIAR COURT
ORLANDO, FL 32835 US

New Mailing Address:

FEI Number: 59-3245438

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BORKES, NANCY M
7338 WOODBRIAR COURT
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BORKES, NANCY M
Address: 7338 WOODBRIAR COURT
City-St-Zip: ORLANDO, FL 32835

Title: V () Delete
Name: KLINKER, PAMELA
Address: 5502 SAN GABRIEL WAY
City-St-Zip: ORLANDO, FL 32837

Title: D () Delete
Name: ACEVEDO, LOURDES
Address: 1443 KINGSTON WAY
City-St-Zip: KISSIMMEE, FL 34744

Title: T () Delete
Name: LONG, CYNTHIA
Address: 503 AVENUE J SE
City-St-Zip: WINTER HAVEN, FL 33880

Title: D () Delete
Name: SCOTT, CATHERINE
Address: 7910 SANDPOINT BLVD
City-St-Zip: ORLANDO, FL 32819

Title: D () Delete
Name: STEWARD, LINDA
Address: 2635 TRYON PLACE
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: KLINKER, PAMELA
Address: 5502 SAN GABRIEL WAY
City-St-Zip: ORLANDO, FL 32837 US

Title: D (X) Change () Addition
Name: THOMPSON, LINDA
Address: 828 SPRING PARK LOOP
City-St-Zip: CELEBRATION, FL 34747 US

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

Title: D (X) Change () Addition
Name: HANUSCHICK, MARTI
Address: 7619 PINEMOUNT DRIVE
City-St-Zip: ORLANDO, FL 32819

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NANCY M. BORKES

P

04/30/2003

Electronic Signature of Signing Officer or Director

Date