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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 24, 1999 8:00 am  
Secretary of State

02-24-1999 90011 021 \*\*\*\*70.00

DOCUMENT # N96000000002

1. Corporation Name

SUNCOAST SKI RANCH, INC.

Principal Place of Business

8113 MISTY OAKS BLVD  
SARASOTA FL 34243  
US

Mailing Address

8113 MISTY OAKS BLVD  
SARASOTA FL 34243  
US



2. Principal Place of Business

21 766 Hudson Ave

Suite, Apt. #, etc.

22 Suite B

City & State

23 Sarasota, FL

Zip

24 34236 Country USA

25 Sarasota

2a. Mailing Address

26 766 Hudson Ave

Suite, Apt. #, etc.

27 Ste. B

City & State

28 Sarasota, FL

Zip

29 34236 Country USA

30

3. Date Incorporated or Qualified

12/22/1995

4. FEI Number

65-0633542

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing



Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

SYPUA, PHILIP J  
2070 RINGLING BOULEVARD  
SARASOTA FL 34237

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 766 Hudson Ave, Ste. B

84 City

Sarasota

FL

85 Zip Code

34236

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

Philip Sympula, V.P.

Jan 8, 99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DV ☒ DELETE

NAME SYPULA, PHILIP J

STREET ADDRESS 2070 RINGLING BOULEVARD

CITY-ST-ZIP SARASOTA FL

TITLE DP ☒ DELETE

NAME FLACH, JEFFREY A

STREET ADDRESS 8113 MISTY OAKS BLVD

CITY-ST-ZIP SARASOTA FL

TITLE DT ☐ DELETE

NAME TRAXLER, LYN

STREET ADDRESS 1600 THOMPSON PARKWAY

CITY-ST-ZIP SARASOTA FL

TITLE DS ☐ DELETE

NAME SCHWENK, DOUG

STREET ADDRESS 1091 TARA VISTA DR.

CITY-ST-ZIP SARASOTA FL

TITLE D ☐ DELETE

NAME KILDAHL, STEVE

STREET ADDRESS 4430 RIVERWOOD AVE

CITY-ST-ZIP SARASOTA FL 34231

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DV ☒ Change ☐ Addition

1.2 NAME Philip Sympula SYPUA, Philip

1.3 STREET ADDRESS 766 Hudson Ave. Ste B

1.4 CITY-ST-ZIP Sarasota FL 34236

2.1 TITLE DP ☒ Change ☐ Addition

2.2 NAME Flach, Jeffrey

2.3 STREET ADDRESS 7290 26th Ct. E

2.4 CITY-ST-ZIP Sarasota, FL 34243

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 supplemental 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE Philip Sympula, V.P.

Date

Daytime Phone #

1-8-99

941-364-8002

0068372

CR2E037 (11/98)