

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N96000001425**

1. Entity Name

CENTRAL FLORIDA SNOW SKIERS, INC.FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT -8 PM 4:45

Principal Place of Business

Mailing Address

**5840 RED BUG LAKE ROAD
SUITE 60
WINTER SPRINGS FL 32708****5840 RED BUG LAKE ROAD
SUITE 60
WINTER SPRINGS FL 32708**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3371903**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

**PERE, DAVID
110 NORTH SPRING TRAIL
ALTAMONTE SPRINGS FL 32714**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees****Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Delete
NAME	PERE, DAVID	
STREET ADDRESS	110 N SPRING TRAIL	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL	

TITLE	Treasurer	☐ Change ☒ Addition
NAME	Eddie Lammers	
STREET ADDRESS	3355 TCU Blvd	
CITY-ST-ZIP	Orlando FL 32817	

TITLE	VPD	☒ Delete
NAME	RALPH, SHARON	
STREET ADDRESS	8354 TANGELO TREE DR	
CITY-ST-ZIP	ORLANDO FL	

TITLE	Board Member	☐ Change ☒ Addition
NAME	Steve Kern	
STREET ADDRESS	6232 Mission Dr	
CITY-ST-ZIP	Orlando FL 32810	

TITLE	TD	☒ Delete
NAME	BYRD, WENDY	
STREET ADDRESS	P O BOX 1310	
CITY-ST-ZIP	MINNEOLA FL 34765	

TITLE	Board Member	☐ Change ☒ Addition
NAME	Stephanie Miller	
STREET ADDRESS	588 Orange Dr # 132	
CITY-ST-ZIP	Altamonte Springs FL 32701	

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	Board Member	☐ Change ☒ Addition
NAME	Brian Munger	
STREET ADDRESS	1606 Prairie Lake	
CITY-ST-ZIP	Orlando FL 32761	

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	President	☐ Change ☒ Addition
NAME	Terri Dale	
STREET ADDRESS	2708 Running Springs Loop	
CITY-ST-ZIP	Orlando FL 32765	

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	Vice-President	☐ Change ☒ Addition
NAME	Cal Sennett	
STREET ADDRESS	637 Oak Hollow Way	
CITY-ST-ZIP	Altamonte Springs FL 32714	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further 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 the empowered.

SIGNATURE:

DAVID PERE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/7/01 407-695-8485

Date

Daytime Phone #

CR2E037 (5/01)

attachment Doc# N96000001425
Past President
David Pere
110 N. Spring Trail
Altamonte Springs, FL
32714

✓ change

Secretary
Christine Barnett
2704 Running Springs Loop
Orlando FL 32765

✓ addition