

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001185

FILED
Mar 19, 2009
Secretary of State

Entity Name: ONYX SKI AND SPORTS CLUB OF TAMPA BAY, INC.

Current Principal Place of Business:

1712 SPRINGWELL PLACE
BRANDON, FL 33511 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 76201
TAMPA, FL 33675 US

New Mailing Address:

FEI Number: 59-3487376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOGUE, JOYCE L
1712 SPRINGWELL PLACE
BRANDON, FL 33511 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: D () Delete
Name: JOHNSON, BYRON
Address: PO BOX 20101
City-St-Zip: TAMPA, FL 33622

Title: D () Delete
Name: FELTON, WILLIE JR
Address: 6732 18TH STREET SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: D () Delete
Name: CAMPBELL, RAY S
Address: 2210 N HIGHLAND AVE
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: HOGUE, JOYCE
Address: 1712 SPRINGWELL PLACE
City-St-Zip: BRANDON, FL 33511

Title: D () Delete
Name: HAMMOND, DELORIS
Address: P.O. BOX 291994
City-St-Zip: TAMPA, FL 33687

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: RAYMOND S. CAMPBELL

D

03/19/2009

Electronic Signature of Signing Officer or Director

Date