


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # 700303
1. Entity Name
PILOT CLUB OF FORT LAUDERDALE FLORIDA, INC.



Principal Place of Business Mailing Address
557 NE 28 STREET **557 NE 28 STREET**
FORT LAUDERDALE, FL 33334 **FORT LAUDERDALE, FL 33334 US**



04122006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
59-6153246 Not Applicable

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

6. Name and Address of Current Registered Agent
BROWN, MARIE
557 NE 28 STREET
FORT LAUDERDALE, FL 33334

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Marie L. Brown* ^{Treasurer} *Marie L. Brown* 4/12/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PED
NAME	REYDEL, MARGARET
STREET ADDRESS	4305 CLEVELAND ST
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	SD
NAME	LARGE, ELIZABETH
STREET ADDRESS	2260 NE 62ND ST
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	T
NAME	BROWN, MARIE
STREET ADDRESS	557 NE 28 STREET
CITY-ST-ZIP	FORT LAUDERDALE, FL 33334
TITLE	P
NAME	BARNES, MARY E
STREET ADDRESS	116 ROYAL PARK DR, APT 1C
CITY-ST-ZIP	FORT LAUDERDALE, FL 33309
TITLE	P
NAME	LEONHARD, MARIE
STREET ADDRESS	8509 SW 17 ST
CITY-ST-ZIP	DAVIE, FL 33324
TITLE	V
NAME	MOORE, DOROTHY
STREET ADDRESS	5160 NW 39 ST
CITY-ST-ZIP	LAUDERDALE LAKES, FL 33319

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04/29/06-80197-002 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 like empowered.

SIGNATURE: *Marie L. Brown* 4/12/06 9547862484
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #