

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Moroney
Secretary of State
OFFICE OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # 700823 (8)
1. Corporation Name
PILOT CLUB OF DELAND FLORIDA INC

95 MAY -1 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
**WOODLAND TOWERS
ACTIVITY ROOM
DELAND FL 32720
US** **PO BOX 9289
GLENWOOD FL 32722
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **04/16/1960** 3a. Date of Last Report **04/13/1994**
4. FEI Number **59-6163661** 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**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under § 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 **26 POST OFFICE BOX 366**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **27**
City & State City & State
23 **28 DELAND, FLORIDA**
Zip Country 7 in Country
24 **25 32721 30 USA**

9. Name and Address of Current Registered Agent
**MYETT, GINNY
2115 GUAVA STR
DELAND FL 32720**

10. Name and Address of New Registered Agent
81 Name **MAGGI FISK COOPER**
82 Street Address (P.O. Box Number is Not Acceptable) **700 WEST HIGHLAND AVENUE**
83
84 City **DELAND** FL 85 Zip Code **32720**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *Maggi Fisk Cooper* **MAGGI FISK COOPER** 3/31/95
Date

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY- ST- ZIP
P MYETT, GINNY 2115 GUAVA STR, PO BOX 9289 NA GLENWOOD FL
PE VIRGINIA GROSE 1201 N. GARFIELD AVENUE DELAND FL 32724
T MAGGI COOPER 1175 W. MINNESOTA AVE., P.O. BOX 366 DELAND FL 32721
S JUNE BOWER, 1529 HAVEN ROAD DELAND FL 32720
D GAYNELLE HAMPTON, 755 TEDDER LAKE RD. DE LEON SPRINGS FL 32130
D KAREN LUCAS 4285 AUDUBON, P.O. BOX 321 DE LEON SPRINGS FL 32130

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE Change Addition
12 NAME **WEELEBOB, BETH**
13 STREET ADDRESS **575 DUSTIN TERRACE**
14 CITY- ST- ZIP **DELTONIA, FLORIDA 32739**
21 TITLE Change Addition
22 NAME **MAGGI FISK COOPER**
23 STREET ADDRESS **P.O. BOX 366 700 WEST HIGHLAND AVENUE**
24 CITY- ST- ZIP **DELAND, FLORIDA 32721 32720**
31 TITLE Change Addition
32 NAME **JANICE GINDL**
33 STREET ADDRESS **2730 N. SARATOGA ROAD**
34 CITY- ST- ZIP **DELAND, FLORIDA 32720**
41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP
51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP
61 TITLE Change Addition
62 NAME **GINNY MYETT**
63 STREET ADDRESS **2115 GUAVA ST.**
64 CITY- ST- ZIP **GLENWOOD, FLORIDA 32722**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE *Maggi Fisk Cooper* **MAGGI FISK COOPER, PRESIDENT ELECT** 3/31/95 904-734-9872
Date