

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700823

FILED
Mar 10, 2009
Secretary of State

Entity Name: PILOT CLUB OF WEST VOLUSIA, INC.

Current Principal Place of Business:

1597 CARR STREET
DELAND, FL 32720 US

New Principal Place of Business:

3001 ANNEZ WAY
DEBARY, FL 32713 US

Current Mailing Address:

PO BOX 220123
GLENWOOD, FL 32722 US

New Mailing Address:

PO BOX 530956
DEBARY, FL 32753 US

FEI Number: 59-6163661

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRIGHT, BERT
1597 CARR ST
DELAND, FL 32720 US

Name and Address of New Registered Agent:

SENEZ, ANNE PRES
3001 ANNEZ WAY
DEBARY, FL 32713 US

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: ANNE SENEZ

03/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: HANKS, FAYE
Address: 1062 GLENWOOD ROAD
City-St-Zip: DELAND, FL 32720

Title: P () Delete
Name: WRIGHT, BERT
Address: 1597 CARR STREET
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: BANKS, LUCY
Address: 2161 ANCHOR AVE
City-St-Zip: DELAND, FL 32720

Title: V (X) Delete
Name: SENEZ, ANNE
Address: 3001 ANNEZ WAY
City-St-Zip: DEBARY, FL 32753

Title: RS () Delete
Name: DYER, BETTY
Address: 715 E. PLYMOUTH AVE
City-St-Zip: DELAND, FL 32721

Title: D (X) Delete
Name: PRICE, JANE
Address: 1775 CARR ST
City-St-Zip: DELAND, FL 32720

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: SENEZ, ANNE
Address: 3001 ANNEZ WAY
City-St-Zip: DEBARY, FL 32713

Title: D (X) Change () Addition
Name: LUCAS, KAREN
Address: 4285 AUDUBON AVE.
City-St-Zip: DELEON SPRINGS, FL 32120

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

Title: V (X) Change () Addition
Name: DYER, BETTY
Address: 715 E. PLYMOUTH AVE
City-St-Zip: DELAND, FL 32721

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: ANNE SENEZ

P

03/10/2009

Electronic Signature of Signing Officer or Director

Date