2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT



						_		mry Ork	, , , , , ,
DOCUMENT # 701460 1. Entity Name PILOT CLUB OF OCALA FLORIDA INC							04-17-2007	7 90236 021 ***	
- 10	ce of Business RT KING STREET 34470 US	Mailing Address P O BOX 4323 OCALA, FL 34478	US	,			65444	igu grafi gigu sisu gigu si	MIT MEMPINA M4 19MA
Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				01162007	Chg-NP	CR2E037 (12/	06)
City & Stat	te	City & State		·		4. FEI Numbe 59-617			Applied For Not Applicable
Zip	Country	Zip	Cou	intry		5. Certificate	of Status Desired	□ \$8.75 Fee Re	Additional quired
	6. Name and Address of Currer	t Registered Agent				7. Name and	Address of New	Registered Agent	
MILLER	CLARA			Name				, <u>, , , , , , , , , , , , , , , , , , </u>	
MILLER, CLARA 4527 SE FORT KING STREET OCALA, FL 34470			Street Address		Address (F	P.O. Box Numbe	er is Not Acceptat	ole)	
1									
				City			•	FL Zip	Code
	e named entity submits this statement tions of registered agent.	for the purpose of changing	j its registere	ed office o	r registere	ed agent, or bot	th, in the State of f	Florida. I am familiar	with, and accept
SIGNATURE									
SIGNATURE.	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: Registere	d Agent signa	ture required	when reinstating)		DATE	
Filing Fee is \$61.25 9. Election Campaign F									
				-	_	\$5.00 мау в		Make check paya	
ļ	Due by May 1, 2007	Trust Fur	nd Contribut	-		\$5.00 May B Added to Fees	Fid	orida Department	of State
10.	OFFICERS AND D	Trust Fur	nd Contribut	ion.	A	Added to Fees	Fid	orida Department	of State
TITLE	OFFICERS AND E	Trust Fur	11.	ion.	P	Added to Fees	ANGES TO OFFIC	orida Department	of State
TITLE NAME	OFFICERS AND D	Trust Fur	nd Contribut 11. TITLE NAM	ion. E	P SUSAI	Added to Fees DDITIONS/CH	ANGES TO OFFICE	Orida Department CERS AND DIRECTO XX Ch	of State
TITLE	OFFICERS AND E	Trust Fur	11. TITLE NAM STRE	ion.	P SUSAN	Added to Fees DDITIONS/CH. N SAUNDE S.E. 62	ANGES TO OFFICE RS ND STREET	Orida Department CERS AND DIRECTO XX Ch	of State
TITLE NAME STREET ADDRESS	OFFICERS AND E P LANZL, REGINA 875 SE 170 ST	Trust Fur	11. TITLE NAM STRE	E E E, EET ADDRESS -ST-ZIP	P SUSAN 4440	Added to Fees DDITIONS/CH. N SAUNDE S.E. 62	ANGES TO OFFICE RS ND STREET 34480	orida Department CERS AND DIRECTO XX Ch	of State
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND E P LANZL, REGINA 875 SE 170 ST SUMMERFIELD, FL 34491 VP SAUNDERS, SUSAN	Trust Fur	11. TITLE NAM STRE CITY TITLE NAM	E E E, EET ADDRESS -ST-ZIP E	P SUSAN 4440	Added to Fees DDITIONS/CH. N SAUNDE S.E. 62	ANGES TO OFFICE RS ND STREET 34480	orida Department CERS AND DIRECTO XX Ch	of State RS IN 10 ange Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND E P LANZL, REGINA 875 SE 170 ST SUMMERFIELD, FL 34491 VP SAUNDERS, SUSAN PO BOX 518	Trust Fur	11. TITLE NAM STRE CITY TITLE NAM STRE	E E, ST-ZIP E E E E E E E E E E E E E E E E E E E	P SUSAN 4440 OCALA	Added to Fees DDITIONS/CH. N SAUNDE S.E. 62 A, FL. Y WILLIA	RS STREET 34480	orida Department CERS AND DIRECTO XX Ch	of State RS IN 10 ange Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND E P LANZL, REGINA 875 SE 170 ST SUMMERFIELD, FL 34491 VP SAUNDERS, SUSAN PO BOX 518 BELLEVIEW, FL 34421	Trust Fur	11. TITLE NAM STRE CITY TITLE NAM STRE CITY	E E, SET ADDRESS -ST-ZIP E E SET ADDRESS -ST-ZIP	P SUSAN 4440 OCALA	Added to Fees DDITIONS/CH. N SAUNDE S.E. 62 A, FL. Y WILLIA	ANGES TO OFFICE RS ND STREET 34480	Orida Department CERS AND DIRECTO XX Ch	of State RS IN 10 ange
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND E P LANZL, REGINA 875 SE 170 ST SUMMERFIELD, FL 34491 VP SAUNDERS, SUSAN PO BOX 518	Trust Fur	11. TITLE NAM STRE CITY TITLE NAM STRE	E E E, -ST-ZIP E E -ST-ZIP E E E -ST-ZIP	P SUSAN 4440 OCALA VPNDY 5561 RS	Added to Fees DDITIONS/CH. N SAUNDE S.E. 62 A, FL. Y WILLIA	RS ND STREET 34480 MS TH STREET	orida Department CERS AND DIRECTO XX Ch	of State RS IN 10 ange
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND E P LANZL, REGINA 875 SE 170 ST SUMMERFIELD, FL 34491 VP SAUNDERS, SUSAN PO BOX 518 BELLEVIEW, FL 34421 RS	Trust Fur	11. TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE CITY	E E E E E E E E E E E E E E E E E E E	P SUSAN 4440 OCALA VP OCALA RS RUTHA	Added to Fees DDITIONS/CH N SAUNDE S.E. 62 A, FL WILLIA A, FE. 4 ANNE REI	RS ND STREET 34480 MS TH STREET	Orida Department CERS AND DIRECTO XX Ch	of State RS IN 10 ange
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND D P LANZL, REGINA 875 SE 170 ST SUMMERFIELD, FL 34491 VP SAUNDERS, SUSAN PO BOX 518 BELLEVIEW, FL 34421 RS RIDGWAY, MELISSA	Trust Fur	11. TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE CITY	E E E E E E E E E E E E E E E E E E E	P SUSAN 4440 OCALA VPNDY 5561 RS RUTHA 14028	Added to Fees DDITIONS/CH N SAUNDE S.E. 62 A, FL WILLIA A, FE. 4 ANNE REI	RS ND STREET 34480 MS TH STREET 34470 SS HWY 464-E	CERS AND DIRECTO XX C	of State RS IN 10 ange
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE THE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND E P LANZL, REGINA 875 SE 170 ST SUMMERFIELD, FL 34491 VP SAUNDERS, SUSAN PO BOX 518 BELLEVIEW, FL 34421 RS RIDGWAY, MELISSA 79 PECAN PASS OCALA, FL 34472 D	Trust Fur	11. TITLE NAM STRE CITY	E E E , SET ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E	P SUSAN 4440 OCALA VINDY 5561 RS RUTHA 14028	Added to Fees DDITIONS/CH N SAUNDE S.E. 62 A, FL WILLIA AN, FE. 4 ANNE REI B N. W. ISTON, F	RS ND STREET 34480 MS TH STREET 34470 SS HWY 464-E L 32668	CERS AND DIRECTO XX Ch	of State RS IN 10 ange
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND E P LANZL, REGINA 875 SE 170 ST SUMMERFIELD, FL 34491 VP SAUNDERS, SUSAN PO BOX 518 BELLEVIEW, FL 34421 RS RIDGWAY, MELISSA 79 PECAN PASS OCALA, FL 34472 D DEL TORO, ROBERTA	Trust Fur DIRECTORS TX Delete Delete	11. TITLE NAM STRE CITY	E E E , SET ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E	P SUSAN 4440 OCALA VINDY 5561 RS RUTHA 14028 MORRI	Added to Fees DDITIONS/CH N SAUNDE S.E. 62 A, FL WILLIA AN, FE. 4 ANNE REI B N. W. LSTON, F CE CORSO	RS ND STREET 34480 MS TH STREET 34470 SS HWY 464-E L 32668	CERS AND DIRECTO XX Ch	of State RS IN 10 ange
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE THE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND E P LANZL, REGINA 875 SE 170 ST SUMMERFIELD, FL 34491 VP SAUNDERS, SUSAN PO BOX 518 BELLEVIEW, FL 34421 RS RIDGWAY, MELISSA 79 PECAN PASS OCALA, FL 34472 D	Trust Fur DIRECTORS TX Delete Delete	11. TITLE NAM STRE CITY	E E E , SET ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E	P SUSAN 4440 OCALA VPNDY 5561 A 14028 MORRI D JOYO 2093	Added to Fees DDITIONS/CH N SAUNDE S.E. 62 A, FL WILLIA AN, FL ANNE REI B N. W. LSTON, F CE CORSO B N. W.	RS ND STREET 34480 MS TH STREET 34470 SS HWY 464-E L 32668	CERS AND DIRECTO XX Ch	of State RS IN 10 ange
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND E P LANZL, REGINA 875 SE 170 ST SUMMERFIELD, FL 34491 VP SAUNDERS, SUSAN PO BOX 518 BELLEVIEW, FL 34421 RS RIDGWAY, MELISSA 79 PECAN PASS OCALA, FL 34472 D DEL TORO, ROBERTA 2115 SE 6TH TERR	Trust Fur DIRECTORS Trust Fur Directors Delete	11. TITLE NAM STRE CITY	E E E ST-ZIP E E E E ET ADDRESS -ST-ZIP E E E E ET ADDRESS -ST-ZIP E E E E ET ADDRESS -ST-ZIP E E E ET ADDRESS -ST-ZIP E E E ET ADDRESS -ST-ZIP	P SUSAN 4440 OCALA VPNDY 5561 A 14028 MORRI D JOYO 2093	Added to Fees DDITIONS/CH N SAUNDE S.E. 62 A, FL WILLIA AN, FE. 4 ANNE REI B N. W. LSTON, F CE CORSO	RS ND STREET 34480 MS TH STREET 34470 SS HWY 464-E L 32668	CERS AND DIRECTO XX Ch	of State RS IN 10 ange
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND E P LANZL, REGINA 875 SE 170 ST SUMMERFIELD, FL 34491 VP SAUNDERS, SUSAN PO BOX 518 BELLEVIEW, FL 34421 RS RIDGWAY, MELISSA 79 PECAN PASS OCALA, FL 34472 D DEL TORO, ROBERTA 2115 SE 6TH TERR OCALA, FL 34471	Trust Fur DIRECTORS TX Delete Delete	11. TITLE NAM STRE CITY	E E E E E S -ST-ZIP E E E E E E E E E E E E E E E E E E E	P SUSAN 4440 OCALA VPNDY 5561A RS RUTHA 14028 MORRI D JOYO OCAN D	Added to Fees DDITIONS/CH N SAUNDE S.E. 62 A, FL WILLIA AN, FL ANNE REI B N. W. LSTON, F CE CORSO B N. W.	RS ND STREET 34480 MS TH STREET 34470 SS HWY 464-E L 32668 50TH CIRC 34482	CERS AND DIRECTO XXI Ch Ch Ch Ch Ch Ch Ch	of State RS IN 10 ange
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	P LANZL, REGINA 875 SE 170 ST SUMMERFIELD, FL 34491 VP SAUNDERS, SUSAN PO BOX 518 BELLEVIEW, FL 34421 RS RIDGWAY, MELISSA 79 PECAN PASS OCALA, FL 34472 D DEL TORO, ROBERTA 2115 SE 6TH TERR OCALA, FL 34471 D PURDY, MARY 5400 NW 26TH LN	Trust Fur DIRECTORS Trust Fur Directors Delete	11. TITLE NAM STRE CITY	E E E F ADDRESS -ST-ZIP E E E ET ADDRESS -ST-ZIP E E E ET ADDRESS -ST-ZIP E E E E ET ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	P SUSAN 4440 OCALA VPNDY 5561 RS RUTHA 14028 MORRI D JOYO OCAL D REGIN	Added to Fees DDITIONS/CH N SAUNDE S.E. 62 A, FL WILLIA AN, FL ANNE REI B N. W. LSTON, F CE CORSO B N. W. LA, FL	RS ND STREET 34480 MS TH STREET 34470 SS HWY 464-E L 32668 50TH CIRC 34482	CERS AND DIRECTO XX Ch	of State RS IN 10 ange
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND E P LANZL, REGINA 875 SE 170 ST SUMMERFIELD, FL 34491 VP SAUNDERS, SUSAN PO BOX 518 BELLEVIEW, FL 34421 RS RIDGWAY, MELISSA 79 PECAN PASS OCALA, FL 34472 D DEL TORO, ROBERTA 2115 SE 6TH TERR OCALA, FL 34471 D PURDY, MARY 5400 NW 26TH LN OCALA, FL 34482	Trust Fur DIRECTORS Trust Fur Directors Delete	11. TITLE NAM STRE CITY	E E E E E E E E E E E E E E E E E E E	P SUSAN 4440 OCALA VPND 5561 RS RUTHA 14028 MORRI D JOYO COAN D REGIN	Added to Fees DDITIONS/CH N SAUNDE S.E. 62 A, FL WILLIA AN, FL ANNE REI B N. W. LSTON, F CE CORSO B N. W. LA, FL	RS ND STREET 34480 MS TH STREET 34470 SS HWY 464-E L 32668 50TH CIRC 34482	CERS AND DIRECTO XX Ch	of State RS IN 10 ange
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE	OFFICERS AND E P LANZL, REGINA 875 SE 170 ST SUMMERFIELD, FL 34491 VP SAUNDERS, SUSAN PO BOX 518 BELLEVIEW, FL 34421 RS RIDGWAY, MELISSA 79 PECAN PASS OCALA, FL 34472 D DEL TORO, ROBERTA 2115 SE 6TH TERR OCALA, FL 34471 D PURDY, MARY 5400 NW 26TH LN OCALA, FL 34482 T	Trust Fur DIRECTORS Trust Fur Directors Delete	11. TITLE NAM STRE CITY	E E E E E E E E E E E E E E E E E E E	P SUSAN 4440 OCALA VPND 5561 60CALA RS RUTHA 14028 MORRI D JOYO COAN D REGIN 875MM T	Added to Fees DDITIONS/CH N SAUNDE S.E. 62 A, FL WILLIA AN, FL ANNE REI B N. W. LSTON, F CE CORSO B N. W. LA, FL NA LANZL ERFIELD,	RS ND STREET 34480 MS THASTREET 34470 SS HWY 464-E L 32668 50TH CIRC 34482 OTH STREET	CERS AND DIRECTO XX Ch	of State RS IN 10 ange
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND E P LANZL, REGINA 875 SE 170 ST SUMMERFIELD, FL 34491 VP SAUNDERS, SUSAN PO BOX 518 BELLEVIEW, FL 34421 RS RIDGWAY, MELISSA 79 PECAN PASS OCALA, FL 34472 D DEL TORO, ROBERTA 2115 SE 6TH TERR OCALA, FL 34471 D PURDY, MARY 5400 NW 26TH LN OCALA, FL 34482	Trust Fur DIRECTORS To belete Delete Delete	11. TITLE NAM STRE CITY	E E E E E E E E E E E E E E E E E E E	P SUSAN 4440 OCALA VPND 5561 RS RUTHA 14028 MORRI D JOYO 2093 OCAN D REGIN 875 SUMMI T CONN	Added to Fees DDITIONS/CH N SAUNDE S.E. 62 A, FL WILLIA AN, FL ANNE REI B N. W. LSTON, F CE CORSO B N. W. LA, FL NA LANZL ERFIELD, IE BROWN	RS ND STREET 34480 MS THASTREET 34470 SS HWY 464-E L 32668 50TH CIRC 34482 OTH STREET	CERS AND DIRECTO XX Ch Ch Ch Ch Ch Ch Ch Ch Ch Ch	of State RS IN 10 ange

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:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-07 352-620-7130 Daytime Phone #