FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **716305** **(8)**

1. Corporation Name

PILOT CLUB OF PALATKA, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
P.O. BOX 2202 PALATKA FL 32178	P.O. BOX 2202 PALATKA FL 32178

3. Date Incorporated or Qualified: **04/03/1969**

3a. Date of Last Report: **04/26/1994**

4. FEI Number: **59-6173299** ☐ Applied For ☐ Not Applicable

2. Principal Place of Business — 21:

Suite, Apt. #, etc. — 22:

City & State — 23:

Zip — 24: Country — 25:

2a. Mailing Address — 26:

Suite, Apt. #, etc. — 27:

City & State — 28:

Zip — 29: Country — 30:

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 S. 199.032,* Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

NICHOLSON, MARILYN
RT 5, BOX 2003
CARRIAGE TERRACE
PALATKA FL 32177

10. Name and Address of New Registered Agent

81 Name: Judy Torode

82 Street Address (P.O. Box Number is Not Acceptable): 257 River Dr.

83:

84 City: East Palatka — **FL** — 85 Zip Code: 32177

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: Marilyn Nicholson — Judy Torode — 4/13/95 DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	D	☒ Change ☐ Addition
NAME	ROGERO, DONNA	1.2 NAME	NICHOLSON, MARILYN	
STREET ADDRESS	RT. 3, BOX 148	1.3 STREET ADDRESS	Rt. 5 Box 2003 Carriage Terrace	
CITY-ST-ZIP	EAST PALATKA FL	1.4 CITY-ST-ZIP	PALATKA, FL.	
TITLE	PD	2.1 TITLE	PD	☒ Change ☐ Addition
NAME	NICHOLSON, MARILYN	2.2 NAME	TORODE, JUDY	
STREET ADDRESS	RT. 5, BOX 2003	2.3 STREET ADDRESS	257 River Rd.	
CITY-ST-ZIP	PALATKA FL	2.4 CITY-ST-ZIP	EAST PALATKA, FL.	
TITLE	TD	3.1 TITLE	TD	☒ Change ☐ Addition
NAME	MACE, ELIZABETH	3.2 NAME	Sherri Fields	
STREET ADDRESS	1703 LAUREL ST.	3.3 STREET ADDRESS	P.O. Box 711 N/A	
CITY-ST-ZIP	PALATKA FL	3.4 CITY-ST-ZIP	Hollister, FL.	
TITLE	VD	4.1 TITLE	VD	☒ Change ☐ Addition
NAME	TORODE, JUDY	4.2 NAME	Elizabeth Mace	
STREET ADDRESS	257 RIVER DR	4.3 STREET ADDRESS	1703 Laurel St	
CITY-ST-ZIP	EAST PALATKA FL	4.4 CITY-ST-ZIP	Palatka, FL.	
TITLE	SD	5.1 TITLE	SD	☒ Change ☐ Addition
NAME	PETTUS, PATRICIA	5.2 NAME	Nancy Jo Reynolds	
STREET ADDRESS	210 STILLWELL AVE	5.3 STREET ADDRESS	212 Westover Circle	
CITY-ST-ZIP	PALATKA FL	5.4 CITY-ST-ZIP	Palatka, FL.	
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS	REMITTED BY MAY 1	
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

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 119.07(3)(i), 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: Marilyn Nicholson — Judy Torode — 4/13/95 Date — 328-8696 Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR

0002654