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Mar 05 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 716305

(8)

1. Corporation Name

PILOT CLUB OF PALATKA, INC.

Principal Place of Business

Mailing Address

P.O. BOX 2202  
PALATKA FL 32178P.O. BOX 2202  
PALATKA FL 32178-22023. Date Incorporated or Qualified  
04/03/19693a. Date of Last Report  
06/06/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City &amp; State

City &amp; State

23

28

Zip

Country

Zip

Country

24

25

29

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MACE, ELIZABETH  
1703 LAUREL ST.  
PALATKA FL 32177

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME NICHOLSON, MARILYN  
STREET ADDRESS RT 5 BOX 2003, CARRIAGE TERRAC  
CITY-ST-ZIP PALATKA FLTITLE D ☐ DELETE  
NAME TORODE, JUDY  
STREET ADDRESS 257 RIVER RD  
CITY-ST-ZIP EAST PALATKA FL 32131TITLE TD ☒ DELETE  
NAME FIELDS, SHERRY  
STREET ADDRESS P.O. BX 711 N/A  
CITY-ST-ZIP HOLLISTER FLTITLE PD ☐ DELETE  
NAME MACE, ELIZABETH  
STREET ADDRESS 1703 LAUREL ST  
CITY-ST-ZIP PALATKA FL 32177TITLE SD ☐ DELETE  
NAME REYNOLDS, NANCY J  
STREET ADDRESS 212 WESTOVER CIRCLE  
CITY-ST-ZIP PALATKA FLTITLE VD ☐ DELETE  
NAME KENT, MARY  
STREET ADDRESS PO BOX 1755 N/A  
CITY-ST-ZIP PALATKA FL 32178-17551.1 TITLE TO ☐ Change ☒ Addition  
1.2 NAME Wanda Stumbo  
1.3 STREET ADDRESS PO BOX 1984 N/A  
1.4 CITY-ST-ZIP Palatka, FL 321782.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing 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: Wanda M. Stumbo, Secy. 2-27-97 904-328-6680

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone 904-328-6680

CR2E037 (9/96)