
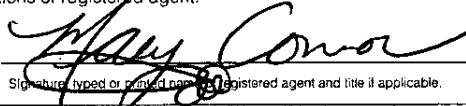
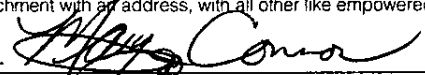


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 15, 2004 8:00 am**  
**Secretary of State**

04-15-2004 90044 006 \*\*\*\*61.25

<b>DOCUMENT # 716305</b> 1. Entity Name <b>PILOT CLUB OF PALATKA, INC.</b>					
Principal Place of Business <b>P.O. BOX 2202 PALATKA FL 32178</b>			Mailing Address <b>P.O. BOX 2202 PALATKA FL 32178</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>59-6173299</b>	
6. Name and Address of Current Registered Agent  <b>WATT, AMANDA 417 KIRBY ST PALATKA FL 32177</b>				7. Name and Address of New Registered Agent Name <b>MARY Connor</b> Street Address (P.O. Box Number is Not Acceptable) <b>1222 S. 13th St.</b> <b>Palatka, FL 32177</b> City <b>Palatka</b> FL <b>32177</b>	
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  DATE <b>4-8-2004</b> <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make Check Payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LINGLE, TIA 601 MOSELEY ST PALATKA FL 32177	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Wanda Stumbo (P) P.O. Box 1984 Palatka, Florida 32178	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WATT, AMANDA 417 KIRBY ST PALATKA FL 32177	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Suzanne Davis (D) 201 Citra Drive Palatka, Florida 32177	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CONNOR, MARY M 1222 S. 13TH ST PALATKA FL 32177	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Joy Tinscher (S) 118 J Browns Rd Satsuma, Florida 32189	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	INMAN, DENISE 601 REID ST. PALATKA FL 32177	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pam Sprouse (D) 123 Esperanza Grove Rd. East Palatka, FL 32131	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SACCARECCIA, CLEM 311 ST. JOHNS AVE PALATKA FL 32177	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Phyllis Criswell (D) 148 J Lundy Dirt Rd. Palatka, Florida 32177	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NICHOLSON, MARILYN 103 CARRIAGE TERRACE PALATKA FL 32177	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dothea Smith (D) P.O. Box 1151 Palatka, Florida 32178	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I 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 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.					
<b>SIGNATURE:</b> 			4-8-2004 386-325-4556		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		