2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2000 8:00 am
Secretary of State
02-20-2000 90056 022 ****70.00

DOCUMENT # 728920

1. Entity Name

THE FLORIDA STATE PILOTS' ASSOCIATION INCORPORAT

Principal Place of Business	Mailing Address
10263 HUNT CLUB LANE PALM BEACH GARDENS FL 33418 US	10263 HUNT CLUB LANE PALM BEACH GARDENS FL 33418-4574 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1509 LAIRD ST.	c/o MICHAEL J. McGRAW
Suite, Apt. #, etc.	Suite, Apt. #, etc. PO Box 1473
City & State: KEY WEST, FL	City & State: KEY WEST, FL
Zip: 33040 Country: USA	Zip: 33041 Country: USA

4. FEI Number: 23-7354479 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RODEN, WILLIAM G JR. 10263 HUNT CLUB LANE PALM BEACH GARDENS FL 33418	Name: MICHAEL J. McGRAW Street Address (P.O. Box Number is Not Acceptable): 1509 LAIRD ST. City: KEY WEST FL Zip Code: 33040

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.

SIGNATURE: MJ McGraw MICHAEL J. McGRAW, TREASURER 2/12/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BEYSON, ERIC C 4910 OCEAN FOREST DR N ATLANTIC BCH FL 32233	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD NADEAU, STEPHEN 16485 COLLINS AVE., SUITE 2634 SUNNY ISLES BEACH, FL 33160-4553	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD NADEAU, STEPHEN 7611 CENTER BAY DR NORTH BAY VILLAGE FL 33141	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HOYE, KEITH 4426 CARYOTA DR. FT. LAUDERDALE, FL 33436	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD RODEN, WILLIAM 10263 HUNT CLUB LANE PALM BEACH GARDENS FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD VISO, JORGE 2622 W. CONLEY AVE. TAMPA, FL 33611	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HOYE, KEITH 1625 SE 10TH AVE #803 FT LAUDERDALE FL 33316	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BROWN, JOSEPH 14852 PLUMOSA DR. JACKSONVILLE BEACH, FL 32250	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD JACCOMA, MICHAEL 2911 PORT BLVD. MIAMI FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD McGRAW, MICHAEL 1509 LAIRD ST. KEY WEST, FL 33040	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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.

SIGNATURE: MJ McGraw SIGNATURE REQUIRED MICHAEL J. McGRAW 2/12/00 305 295 3347
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #