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 FEB 27 PM 3:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **754034** **(7)**

1. Corporation Name

TREASURE COAST PILOT CLUB OF VERO BEACH, INC.

Principal Place of Business	Mailing Address
P O BOX 7260 VERO BEACH FL 32968 US	P O BOX 7260 VERO BEACH FL 32968 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/04/1980	3a. Date of Last Report: 04/06/1994
4. FEI Number: 51-0242733	☐ Applied For ☐ Not Applicable
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	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
HOGAN, PATRICIA A 1500 B 32ND AVE VERO BCH FL 32962	81 Name: Kathy Medlock 82 Street Address (P.O. Box Number is Not Acceptable): 5860 34th Lane 83 84 City: Vero Beach FL 85 Zip Code: 32966

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: Kathy B Medlock — 2/20/95
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	P	11 TITLE	Director	☒ Change ☐ Addition
NAME	LONG, PAT	12 NAME	Pat Long	
STREET ADDRESS	3615 18TH STR	13 STREET ADDRESS	3615 18th street	
CITY-ST-ZIP	VERO BCH FL	14 CITY-ST-ZIP	Vero Beach, FL 32960	
TITLE	D	21 TITLE	Treasurer	☐ Change ☒ Addition
NAME	REGARTY, GERRIE	22 NAME	Kathy Medlock	
STREET ADDRESS	155 16TH AVE	23 STREET ADDRESS	5860 34th Lane	
CITY-ST-ZIP	VERO BCH FL	24 CITY-ST-ZIP	Vero Beach, FL	
TITLE	PE	31 TITLE	President	☒ Change ☐ Addition
NAME	CALLAHAN, DEBORAH	32 NAME	Deborah Callahan	
STREET ADDRESS	306 14TH AVE	33 STREET ADDRESS	306 14th Ave.	
CITY-ST-ZIP	VERO BCH FL	34 CITY-ST-ZIP	Vero Beach, FL	
TITLE	RS	41 TITLE	Recording Secretary	☐ Change ☒ Addition
NAME	SCHMIDT, BARBARA	42 NAME	Barbara Peltier	
STREET ADDRESS	4125 13TH STR	43 STREET ADDRESS	2905 - 1ST Lane	
CITY-ST-ZIP	VERO BCH FL	44 CITY-ST-ZIP	Vero Beach, FL 32962	
TITLE	T	51 TITLE	Vice President	☒ Change ☐ Addition
NAME	HOGAN, PATRICIA	52 NAME	1500 32nd Ave #3	
STREET ADDRESS	1500 32ND AVE #3	53 STREET ADDRESS	Patricia Hogan	
CITY-ST-ZIP	VERO BCH FL	54 CITY-ST-ZIP		
TITLE	VP	61 TITLE	President-Elect	☒ Change ☐ Addition
NAME	NICHOLS, MARGARET	62 NAME	marge Nichols	
STREET ADDRESS	855 SW HIGHLAND DR.	63 STREET ADDRESS	855 s w Highland Dr.	
CITY-ST-ZIP	VERO BCH, FL 00000	64 CITY-ST-ZIP	Vero Beach, FL 32962	

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: Deborah K. Callahan — 2/9/95 (Date) — (407) 562-4426 (Daytime Phone #)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Deborah K. Callahan, President