

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 754034 (7)
1. Corporation Name
TREASURE COAST PILOT CLUB OF VERO BEACH, INC.



Principal Place of Business
**P O BOX 7280
VERO BEACH FL 32968
US**

Mailing Address
**P O BOX 7280
VERO BEACH FL 32968
US**

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Qualified
09/04/1980

3a. Date of Last Report
02/27/1995

4. FEI Number
51-0242733

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

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**MEDLOCK, KATHY
5860 34TH LANE
VERO BCH FL 32966**

10. Name and Address of New Registered Agent

81 Name
BARBARA PELTIER

82 Street Address (P.O. Box Number is Not Acceptable)
2905 1ST LANE

83 City
VERO BEACH

84 Zip Code
FL 32968

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 *Barbara Peltier*

2/3/96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	LONG, PAT	
STREET ADDRESS	3815 18TH STR	
CITY-ST-ZIP	VERO BCH FL	
TITLE	DT	☒ DELETE
NAME	MEDLOCK, KATHY	
STREET ADDRESS	5860 34TH LANE	
CITY-ST-ZIP	VERO BCH FL	
TITLE	P	☐ DELETE
NAME	CALLAHAN, DEBORAH	
STREET ADDRESS	306 14TH AVE	
CITY-ST-ZIP	VERO BCH FL	
TITLE	RS	☒ DELETE
NAME	PELTIEZ, BARBARA	
STREET ADDRESS	2905 1ST LANE	
CITY-ST-ZIP	VERO BCH FL	
TITLE	VP	☒ DELETE
NAME	HOGAN, PATRICIA	
STREET ADDRESS	1500 32ND AVE #3	
CITY-ST-ZIP	VERO BCH FL	
TITLE	PE	☐ DELETE
NAME	NICHOLS, MARGE	
STREET ADDRESS	855 SW HIGHLAND DR.	
CITY-ST-ZIP	VERO BCH, FL 00000	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	D	☐ Change ☒ Addition
12 NAME	JOAN EDWARDS	
13 STREET ADDRESS	10 TARPON DRIVE	
14 CITY-ST-ZIP	VERO BEACH FL 32966	
21 TITLE	T	☐ Change ☒ Addition
22 NAME	BARBARA PELTIER	
23 STREET ADDRESS	2905 1ST LANE	
24 CITY-ST-ZIP	VERO BEACH FL 32968	
31 TITLE	D	☒ Change ☐ Addition
32 NAME	DEBORAH CALLAHAN	
33 STREET ADDRESS	306 14TH AVE	
34 CITY-ST-ZIP	VERO BEACH FL 32962	
41 TITLE	S	☐ Change ☒ Addition
42 NAME	KARIN RAMSEY	
43 STREET ADDRESS	895 24 PL SW	
44 CITY-ST-ZIP	VERO BEACH FL 32962	
51 TITLE	D	☐ Change ☒ Addition
52 NAME	SHIRLEY DAVIS	
53 STREET ADDRESS	635 34TH TERRACE	
54 CITY-ST-ZIP	VERO BEACH FL 32968	
61 TITLE	P	☒ Change ☐ Addition
62 NAME	MARGE NICHOLS	
63 STREET ADDRESS	855 SW HIGHLAND DR	
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)(k), 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: *Barbara Peltier* **BARBARA PELTIER** **2/2/96** **(407) 562-9031**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)