

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 754034

1. Entity 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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

HEGARTY, GERRI
115 -16TH AVE
VERO BEACH FL 32962

4. FEI Number

51-0242733

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HEGARTY, GERRIE 155- 16TH AVE VERO BEACH FL 32960	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T PELTIER, BARBARA 2905 FIRST LN VERO BEACH FL 32968	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S WAKEFIELD, JUDY 1901 INDIAN RIVER BVD #205A VERO BEACH FL 32960	☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DM MARSHA, AIKEN 615- 34TH TERR VERO BEACH FL 32968	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DCS CUMMINGS, RAE 718- 24TH SQUARE VERO BEACH FL 32966	☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PEVP MROZ, BARBARA 3100 N A1A PHD4 FORT PIERCE FL 34949	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DCS NEENA VAN CAMP 432 CANDLE AVE SEBASTIAN FL 32958	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD NEENA VAN CAMP 432 CANDLE AVE SEBASTIAN FL 32958	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DF MARILYN DELFS 2212 SEVILLE AVE VERO BEACH FL 32960	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PEVP LEMO, PHYLLIS 616 ROSELAND RD ROSELAND FL 32957	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MROZ, BARBARA 3100 N A1A PHD4 FORT PIERCE FL 34949	☒ Change ☐ 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.

SIGNATURE:

Barbara Pelcier

BARBARA PELTIER

4-21-01 561 562-9031

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)

0031293

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90070 041 *****61.25



DO NOT WRITE IN THIS SPACE