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

Mar 17, 2004 8:00 am **DOCUMENT # 754034 Secretary of State** 1. Entity Name 03-17-2004 90003 008 ****61.25 TREASURE COAST PILOT CLUB OF VERO BEACH, INC. Principal Place of Business Mailing Address P O BOX 7280 VERO BEACH FL 32968 P O BOX 7280 VERO BEACH FL 32968 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 51-0242733 Not Applicable 32961 Country 32961 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HEGARTY, GERRI Street Address (P.O. Box Number is Not Acceptable) 115 -16TH AVE VERO BEACH FL 32962 Zip Code FL 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 Stonature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2004 Trust Fund Contribution. Added to Fees Florida Department of State * ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. DCS TITLE Delete TITLE ☐ Change Addition EDWARDS, JOAN NAME MARILYN DELFS NAME 18 TARPON DRIVE 2212 SEVILLE AVE STREET ADDRESS STREET ADDRESS VERO BEACH FL 32960 CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32960 TITLE Delete TITLE Change **★**Addition WAKEFIELD, JUDITH SHIRLEY REIFSNIDER NAME 1901 INDIAN RIVER BLVD 205 A STREET ADDRESS 35 VISTA GARDENS TR. 4102 STREET ADDRESS VERO BEACH FL 32960 CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32968 ☐ Delete TITLE ☐ Channe ☐ Addition PELTIER, BARBARA NAME NĂME 2905 FIRST LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH FL 32968 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition WILLIAMS, PAT CAROLYN SHEPPARD NAME NAME 849 LAKE ORCHID CIRCLE STREET ADDRESS STREET ADDRESS 1121 35TH AVENUE VERO BEACH FL 32962 CITY-ST-ZIP CITY-ST-ZIP VEED BEACH FL 32960 TITLE Delete TITLE ٧P ☐ Change Addition CUMMINGS, RAE RYMER ESTER 1111 SSTH AVENUE NAME NAME 718 24TH SQUARE STREET ADDRESS STREET ADDRESS VERO BEACH FL 32962 CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32960 ☐ Delete TITLE Change Addition HUNT, MAIME NAME MAYME NAME 292 GRAND ROYAL CIRCLE 203 STREET ADDRESS STREET ADDRESS VERO BEACH FL 32962 CITY-ST-ZIP CITY-ST-ZIP

FILED

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.