## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra Br Mortham

Principal Piace of Business  Mailing Address 6533 TOD ROAD JACKSOWILE F1 32216 US  ***DEFINITE F	ANNUAL REPORT		Secretary of State			Secret	arv (	of S	tate	
FLORIDA DISTRICT INC. PILOT CLUB INTERNATIONAL.  Principal Place of Business  833 TODD ROAD JACKSONVILE FL 32216  22 Principal Place of Business  24 Mailing Address 9  25 Surio, Apl 4, etc.  26 Surio, Apl 4, etc.  27 Surio, Apl 4, etc.  28 Surio, Apl 4, etc.  29 Country  29 20 Country  20 Country  20 20 Country  20 20 Country  20 20 Personal Property fac due Justice 16 Surious 16 Su		1998		DIVISION OF CO			~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	J J	<b>01</b> ~	
Principal Place of Business   Mailing Address	DOCUI 1. Corporatio	MENT #	739656	(7)						
Principal Place of Business   Mailing Address	FLORIDA DISTRICT INC. PILOT CLUB INTERNATIONAL.					1				
## Applicable of Business   Mailing Addriess   SSI TODO ROAD   JACKSONVILLE FL 32216   JACKSONVILLE FL	'50				HEREN HANDE HINE AND A CHARLES	A APIN BURNI BURN	<b>       </b>	DA BUBU UDBU		
853 TODO ROAD  MCKSOWNILE FL \$2216  Za Mailing Address	Delevier d Disa	( D i		Adatte a Autoria	<del></del>		<u> </u>		EIRN EIRN AI	ON ENGLISEL
ACKSOMMILE FL 32216   Subsenses   Sa. Mailing Address   Sa. Mail	Principal Place	e of Business		Mailing Address						
US  ### A. FEI Number  ### A. FEI Number  ### A. FEI Number  ### A. FEI Number  ### NOT APPLICABLE  ### State  ### State  ### State  ### City & State  ### Country  ### State  ### Country  ### D. Name and Address of Current Registered Agent  ### A. Fei Number  ### Not Applicable  ### State  ### Country  ### A. Fei Number  ### Not Applicable  ### State  ### City & State  ### Country  ### D. Is this nonprofit corporation a hormoconers association?  ### Personal Properly Tax diss June 30.										
NOT APPLICABLE   Series   S										
2. Principal Place of Business   2a. Mailing Address   5. Certificate of Status Desired   \$6. Election Campaign Financing   \$5.00 May Be Fee Regulated   \$5.00									<u> </u>	
Surfice, Apr. #, etc.    Surfice, Apr. #, etc.   Surfi	2. Principal P	lace of Business		2a. Mailing Address					<del></del> _	
Surio, April #, etc.  22				<b>⊢</b> ¬			5. Certificate of Status Desired	LJ		
City & State    20	Sulte, Apt.	#, etc.		Suite, Apt. #, etc.			6. Election Campaign Financing		\$5.00	/ay Ве
28   270   26   28   30   27	22									
Country   Zip   Country   Zip   Zi		е		— · · · · · · · · · · · · · · · · · · ·						1?
Personal Property Tax due June 30.   Yes   No			Country		Country				<del></del> -	engible
WAGGONER, BETTY 633 TODD ROAD  JACKSONVILLE FL 32216  84 City Wildwood FL 85 Zip Code R4 7.85  64 City Wildwood FL 85 Zip Code R4 7.85  For Code R4 7.85  Fo	24	25		29 30	ol	İ	Personal Property Tax due Jun	e 30	Yes [	1
WAGGONER, BETTY 6S3 TODD ROAD  JACKSONVILLE FL 32216  4 City W11dyod FL 88 Zip Code R 4 2785  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the aboven-mended coprocions submits this statement for the purpose of changing its registered agent Lampagation with, and adaptagation in an adaptagation with a languagation and adaptagation with a languagation with a languagation and adaptagation with a languagation with a languagation and adaptagation and adaptagation and adaptagation and adaptagation with a languagation and adaptagation an		9. Name an	d Address of Current F	legistered Agent		1	0. Name and Address of New R	egistered A	gent	
Signature   Sign						nda	Holden			
JACKSONVILLE FL 32216    64					82 Street	Address	(P.O. Box Number is Not Accepte	able)		
SIGNATURE   Content   Co			218			00 0	K 110		<del></del>	
Wildwood   Land   A4785	JACKSU	MANIPPE LF 25	2 10							
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 registeped again, 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 again. I am fault in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered again against registered of directors. I hereby accept the appointment as registered again against registered again against registered again against registered. I have been such as when reliability.  12.					Wifi	1 dwa	οđ	FL	1 547	0.5
SIGNATURE   Column	11. Pursuant	to the provisions	of Sections 617.0502 a	nd 617.1508, Florida Statutes,	the above-named	corpora	tion submits this statement for the	purpose of	changing its	s registered
SIGNATURE   Column	agent. I a	egistered agent m familiar with, i	, or both, in the State of and accept thu obligation	eronda. Such change was autons of, Section 617.0503, Floric	da Statutes.	poration	s board or directors, I hereby acce	apt the appo	iniment as	registered
TITLE DG WAGGONER, BETTY STREET ADDRESS TO DELETE SAND DIRECTORS IN 12  MAME WAGGONER, BETTY STREET ADDRESS TO COMPLETE SAND DIRECTORS IN 12  MAME STREET ADDRESS TO COMPLETE SAND DIRECTORS IN 12  MAME HOLDEN, LINDA STREET ADDRESS TO COMPLETE STREET ADDRESS TO COMP		Kinda	Mude							
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STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32216  TITLE NAME HOLDEN, LINDA 4766 CR 118 U11dwood, FL 34785  CITY-ST-ZIP W11dwood, FL 34785  CITY-ST-ZIP JACKSONVILLE FL 32216  TITLE NAME HOLDEN, LINDA 4766 CR 118 COVERNOT-Elect D Janet Potter Janet Potte		DG	01710211011110			Gov				Addition
STREET ADDRESS   STRE	NAME	WAGGONE	r, betty		1.2 NAME	Lin	da Holden			!
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STREET ADDRESS CITY-ST-ZIP WILDWOOD FL 34785  TILE TD NAME EDWARDS, MAY STREET ADDRESS CITY-ST-ZIP FERNANDINA BEACH FL 32034  TILE SD NAME STREET ADDRESS CITY-ST-ZIP ORANGE PARK FL 32073  TILE NAME STREET ADDRESS CITY-ST-ZIP DELETE SD NAME STREET ADDRESS CITY-ST-ZIP ORANGE PARK FL 32073  TILE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET AD			MOA	☐ DETE1F				ι	Unange	Notition La
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Thereby 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 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.

904-277-7311

May 29 1998 8:00am