

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 28, 2004 8:00 am
Secretary of State

04-28-2004 90263 016 ****61.25

DOCUMENT # 739656 1. Entity Name FLORIDA DISTRICT INC. PILOT CLUB INTERNATIONAL.					
Principal Place of Business 3181 CHAIRES CROSS RD TALLAHASSEE, FL 32317 US			Mailing Address 3181 CHAIRES CROSS RD TALLAHASSEE, FL 32317 US		
2. Principal Place of Business 2055 17 th Street Suite, Apt. #, etc. Vero Beach FL		3. Mailing Address 2055 17 th Street Suite, Apt. #, etc.			
City & State Vero Beach FL		City & State Vero Beach FL		4. FEI Number NOT APPLICABLE	
Zip 32960 Country Indian River		Zip 32960 Country Indian River		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FREEMAN, ANN M 2055 17TH ST VERO BEACH, FL 32960			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GED FREEMAN, ANN M 2055 17TH ST VERO BEACH, FL 32960	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Governor (P)	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FDG VENDRICK, JUDY 30347 LETTINGWELL CIRCLE WESLEY CHAPEL, FL 33543	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Governor Elect (D) Agatha Muse-Salters 1845 Cooper Ave Trail Tallahassee FL 32303	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JACQUES, SHIRLEY 3043 N. 1ST AVE MILTON, FL 32583	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary (S) Carolyn White 1587 Sherrie Lane Holly Hill FL 32117	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T EDENFIELD, CHARLOTTE 3181 CHAIRES CROSS RD TALLAHASSEE, FL 32317	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer (T) Ann Sears 6160 N. Davis Hwy, Suite 7 Pensacola FL 32504	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GD MOUNT, LAVELLE 4903 NW 41ST ST GAINESVILLE, FL 32606	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Robert F. Muchaw 6100 Chayenne Drive Milton FL 32570	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LGD COLLIER, CAROLYN DILL 101 N ROCK RD FORT PIERCE, FL 34945	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Deborah DiFranco 400 Perthshire Drive Orange Park FL 32073	☐ 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: <u>Ann M. Freeman</u> <u>Charlotte Edenfield</u> <u>4/27/04</u> <u>850-894-3000</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR					

772-231-4402