


**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 09, 2003 8:00 am
Secretary of State

04-09-2003 90183 027 ****61.25

DOCUMENT # 700032
1. Entity Name
PILOT CLUB OF TALLAHASSEE, INC.



Principal Place of Business Mailing Address
1314 JACKSON STREET TALLAHASSEE FL 32303

2. Principal Place of Business 3. Mailing Address
2623 N. MONROE STREET P.O. BOX 4104
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
TALLAHASSEE, FL TALLAHASSEE, FL
Zip Country Zip Country
32303 USA 32315 USA

4. FEI Number **59-6009746** Applied For
Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
MIZELL, BELINDA
1314 JACKSON STREET
TALLAHASSEE FL 32303

7. Name and Address of New Registered Agent
Name **FURLONG, JANE**
Street Address (P.O. Box Number is Not Acceptable)
2623 N. MONROE STREET
City **TALLAHASSEE** FL Zip Code **32303**

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: Jane P. Furlong DATE: April 7, 2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	MIZELL, BELINDA	
STREET ADDRESS	1314 JACKSON ST	
CITY-ST-ZIP	TALLAHASSEE FL 32303	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	WALLACE, MARGARET	
STREET ADDRESS	932 HAWTHORNE STREET	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	D	<input type="checkbox"/> Delete
NAME	WATSON, LAKE	
STREET ADDRESS	P.O BOX 180273	
CITY-ST-ZIP	TALLAHASSEE FL 32318	
TITLE	TT	<input type="checkbox"/> Delete
NAME	DERVISH, BRIDGET	
STREET ADDRESS	628 SUMMERBROOKE DR	
CITY-ST-ZIP	TALLAHASSEE FL 32312	
TITLE	D	<input type="checkbox"/> Delete
NAME	FORLONG, JANE	
STREET ADDRESS	2623 NORTH MONROE STREET	
CITY-ST-ZIP	TALLAHASSEE FL 32303	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	THOMAS, LUCRETIA	
STREET ADDRESS	307 BRADFORD RD.	
CITY-ST-ZIP	TALLAHASSEE, FL 32303	
TITLE	V/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WATSON, LAKECIA	
STREET ADDRESS	3131 HAWKS LANDING DR.	
CITY-ST-ZIP	TALLAHASSEE, FL 32309	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FURLONG, JANE	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	S/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DIXON, DEVE	
STREET ADDRESS	2511 NOBLE DR.	
CITY-ST-ZIP	TALLAHASSEE, FL 32308	

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: JANE P. FURLONG REQUIRE JANE P. FURLONG 04/07/03 (850) 386-2193

CR2E037 (10/02)