

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

**1314 JACKSON STREET
TALLAHASSEE FL 32303**

Mailing Address

**1314 JACKSON STREET
TALLAHASSEE FL 32303**

2. Principal Place of Business

2623 N. MONROE STREET

Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 4104

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

TALLAHASSEE, FL

City & State

TALLAHASSEE, FL

4. FEI Number **59-6009746**

Applied For

☐ Not Applicable

Zip **32303**

Country **USA**

Zip **32315**

Country **USA**

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

April 7, 2003

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **MIZELL, BELINDA**
STREET ADDRESS **1314 JACKSON ST**
CITY-ST-ZIP **TALLAHASSEE FL 32303**

TITLE **VD** ☒ Delete
NAME **WALLACE, MARGARET**
STREET ADDRESS **932 HAWTHORNE STREET**
CITY-ST-ZIP **TALLAHASSEE FL 32308**

TITLE **D** ☐ Delete
NAME **WATSON, LAKE**
STREET ADDRESS **P.O BOX 180273**
CITY-ST-ZIP **TALLAHASSEE FL 32318**

TITLE **TT** ☐ Delete
NAME **DERVISH, BRIDGET**
STREET ADDRESS **628 SUMMERBROOKE DR**
CITY-ST-ZIP **TALLAHASSEE FL 32312**

TITLE **D** ☐ Delete
NAME **FORLONG, JANE**
STREET ADDRESS **2623 NORTH MONROE STREET**
CITY-ST-ZIP **TALLAHASSEE FL 32303**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T/D** ☐ Change ☒ Addition
NAME **THOMAS, LUCRETIA**
STREET ADDRESS **307 BRADFORD RD.**
CITY-ST-ZIP **TALLAHASSEE, FL 32303**

TITLE **V/D** ☒ Change ☐ Addition
NAME **WATSON, LAKECIA**
STREET ADDRESS **3131 HAWKS LANDING DR.**
CITY-ST-ZIP **TALLAHASSEE, FL 32309**

TITLE **D** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **P/D** ☒ Change ☐ Addition
NAME **FURLONG, JANE**
STREET ADDRESS
CITY-ST-ZIP

TITLE **S/D** ☐ Change ☒ Addition
NAME **DIXON, DEWE**
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 **SIGNATURE REQUIRED JANE P. FURLONG 04/07/03 (850) 386-2193**

CR2E037 (10/02)