## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## Apr 13, 2006 8:00 am Secretary of State **DOCUMENT #700188** 04-13-2006 90284 006 \*\*\*\*61.25 PILOT CLUB OF WINTER HAVEN, FLORIDA, INC., Principal Place of Business Mailing Address P.O. BOX 9104 P.O. BOX 9104 WINTER HAVEN, FL 33883 WINTER HAVEN, FL 33883 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04102006 Chg-NP CR2E037 (11/05) City & State City & State 4. FEI Number 59-6173306 Applied For Not Applicable Zip Country Zip Country \$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 HART, JANET 4041 CYPRESS LANDING EAST Street Address (P.O. Box Number is Not Acceptable) WINTER HAVEN, FL 33884 City 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 reinstating) DATE . 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Delete TITLE Change Addition RUTH BEESON BEESON RUTH NAME NAME 333 LAKE HOWARD DR, NW #302D STREET ADDRESS 235 6TH STNW # 604 STREET ADDRESS CITY-ST-ZIP WINTER HAVEN, FL 33881 CITY-ST-ZIP WINTER HAVEN FL 33880 ח TITLE Delete IIILE Change ☐ Addition GRIFFITH, DIANE NAME NAME STREET ADDRESS 4518 ASHFORD DR STREET ADDRESS CITY-ST-ZIP WINTER HAVEN, FL 33880 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition HART JANET NAME NAME STREET ADDRESS 4041 CYPRESS LANDING E. STREET ADDRESS CITY-ST-ZIP WINTER HAVEN, FL 33884 CITY-ST-ZIP TITLE ☐ Delete TITLE Addition COLLINS, HELEN NAME NAME STREET ADDRESS 2470 29TH ST., N.W. STREET ADDRESS CITY-ST-ZIP WINTER HAVEN, FL 33881 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition EUNICE BEASLEY RD. MASSEY, CLARICE NAME NAME STREET ADDRESS 521 LITTLE LAKE COURT STREET ADDRESS FL 33884 CITY-ST-ZIP WINTER HAVEN, FL 33884 CITY-ST-ZIP WINTER HAVEN TITLE ☐ Delete TITLE STAACK, JACKIE NAME NAME STREET ADDRESS PO BOX 9444 STREET ADDRESS WINTER HAVEN, FL 33883 CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

ANET A. HART 4-7-06

FILED