

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2008 8:00 am
Secretary of State

04-04-2008 90021 037 ****61.25

DOCUMENT # 700188

1. Entity Name
PILOT CLUB OF WINTER HAVEN, FLORIDA, INC..



Principal Place of Business
**P.O. BOX 9104
WINTER HAVEN, FL 33883**

Mailing Address
**P.O. BOX 9104
WINTER HAVEN, FL 33883**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03122008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-6173306

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HART, JANET
4041 CYPRESS LANDING EAST
WINTER HAVEN, FL 33884**

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 reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

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 **D** ☐ Delete
NAME **BROSSEAU, DORIS**
STREET ADDRESS **2800 21ST NW**
CITY-ST-ZIP **WINTER HAVEN, FL 33881**

TITLE **V** ☐ Delete
NAME **BOSWELL, CLARICE**
STREET ADDRESS **PO BOX 458**
CITY-ST-ZIP **EAGLE LAKE, FL 33839**

TITLE **T** ☐ Delete
NAME **HART, JANET**
STREET ADDRESS **4041 CYPRESS LANDING E.**
CITY-ST-ZIP **WINTER HAVEN, FL 33884**

TITLE **P** ☐ Delete
NAME **COLLINS, HELEN**
STREET ADDRESS **2470 29TH ST., N.W.**
CITY-ST-ZIP **WINTER HAVEN, FL 33881**

TITLE **D** ☒ Delete
NAME **BEASLEY, EUNICE**
STREET ADDRESS **718 CANBERRA RD**
CITY-ST-ZIP **WINTER HAVEN, FL 33884**

TITLE **S** ☐ Delete
NAME **STAACK, JACKIE**
STREET ADDRESS **PO BOX 9444**
CITY-ST-ZIP **WINTER HAVEN, FL 33883**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☒ Addition
NAME **DIANE GRIFFITH**
STREET ADDRESS **4518 ASHFORD DR.**
CITY-ST-ZIP **WINTER HAVEN FL 33880**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: Janet A. Hart **JANET A. HART** 3-30-08 863-661-3479
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #