2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Apr 11, 2008 8:00 am Secretary of State **DOCUMENT #700211** 04-11-2008 90048 019 ****61.25 PILOT CLUB OF PLANT CITY FLORIDA INC Principal Place of Business Mailing Address 106-S. EVERS ST. 🚣 1748 BROOKSTONE WAY PLANT CITY, FL 33566 PLANT CITY, FL 33566 2. Principal Place of Business No. P.O. Box # 3. Mailing Address 402 Suite, Apt. #, etc. Suite, Apt. #, etc. 04072008 Chg-NP CR2E037 (12/06) 4. FEI Number 59-6173300 City & State City & State Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROBERTS, ANN 1748 BROOKSTONE WAY Street Address (P.O. Box Number is Not Acceptable) PLANT CITY, FL 33566 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 Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Added to Fees Due by May 1/2008 OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TID F Director Delete TITLE Kinney, J.// Kinney, J.// Lambright st. 111 12 Lambright st. 111 23 Lambright st. NAME BERGHOFER, VIRGINIA NALE STREET ADDRESS 912 N. CRYSTAL TERR STREET ADDRESS CiTY-ST-7IP PLANT CITY, FL 33563 CITY-ST-ZIP 33604 TITLE ☐ Delete TITLE ☐ Change ☐ Addition GREENE, BARBARA NAME NAME STREET ADDRESS 3511 E. KNOLLWOOD STREET STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33610 CITY-ST-7IP TITLE DΕ White, Kathy 3302 N. Habana Apt B Delete TITLE ☐ Addition WHITE, KATHY NAME NAME 6302 N. HABANA, APT B STREET ADDRESS STREET ADDRESS CITY-ST-71P TAMPA, FL 33614 CITY-ST-ZIP F-1 33619 Flect TITLE TITLE Delete (Change ☐ Addition miller, Walley NAME KINNEY, JILL NAME STREET ADDRESS 111 F LAMBRIGHT ST STREET ADDRESS 1402 Redbader. **TAMPA, FL 33604** CITY-ST-ZIP CITY-ST-ZIP TITLE VΡ ☐ Delete TITLE ☐ Change ☐ Addition NUME ROBERTS, ANN NAME STREET ADDRESS 1748 BROOKSTONE WAY STREET ADDRESS PLANT CITY, FL 33566 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITL F ☐ Change ■ Addition NAME RILEY, NOMA NAME STREET ADDRESS 5201 S. FARKAS ROAD STREET ADDRESS PLANT CITY, FL 33566 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 ceth; 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 attackprent with an address, with all other like empowered.

FILED