


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 25, 2004 8:00 am
Secretary of State

08-25-2004 90004 038 ****61.25

DOCUMENT # 700320 1. Entity Name PILOT CLUB OF VERO BEACH, INC.					
Principal Place of Business P.O. BOX 7049 VERO BEACH, FL 32961			Mailing Address P.O. BOX 7049 VERO BEACH, FL 32961		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address PO Box 7049 Suite, Apt. #, etc.			
City & State VERO BEACH FL		City & State VERO BEACH FL		4. FEI Number 59-6140652	
Zip Country		Zip Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COURTNEY, EUDORA 3855 INDIAN RIVER DR. E VERO BEACH, FL 32963		7. Name and Address of New Registered Agent Name <u>IRENE W. BATES</u> Street Address (P.O. Box Number is Not Acceptable) <u>652 HATTERAS CT. SW</u> City <u>VERO BEACH</u> <u>FL</u> Zip Code <u>32968</u>			
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 <u>Irene W. Bates</u> <u>Treasurer</u> <u>8/20/2004</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>					
Filing Fee is \$61.25 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WOLFE, BARBARA 2140 55TH AVENUE VERO BEACH, FL 32966	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT JANE P. AULTON 1849 21st Street VERO BEACH FL 32960 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PANTZKE, VIRGINIA 225 15TH AVENUE VERO BEACH, FL 32962	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY BARBARA WOLFE 2140 55TH AVE VERO BEACH FL 32966 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T COURTNEY, EUDORA 3855 INDIAN RIVER DR E VERO BEACH, FL 32963	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER IRENE W. BATES 652 HATTERAS CT SW VERO BEACH FL 32968 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ORSINO, JEANNE 49-106 WOODLAND DR VERO BEACH, FL 32962	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Elect Carolyn Peeler 936 S 91st Ave VERO BEACH FL 32967 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALLIDAY, SHIRLEY 711 16TH AVE. VERO BEACH, FL 32962	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WOLFE, BARBARA 2140 55TH AVE. VERO BEACH, FL 32966	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OFFICER OR DIRECTOR</small>			<u>President</u> <u>8/20/2004</u> <small>Date Daytime Phone #</small>		