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Feb 28 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 700546 (5)

1. Corporation Name

PILOT CLUB OF MILTON FLORIDA INC

Principal Place of Business

206 RAYMOND HOBBS ST
MILTON FL 32570
US

Mailing Address

P O BOX 52
MILTON FL 32572-0052
US

2. Principal Place of Business

21 123 Sheffield Dr.

Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 123 Sheffield Dr.

Suite, Apt. #, etc.

27 Milton, FL

City & State

28 32571

Zip

Country

29

30

USA

3. Date Incorporated or Qualified

03/01/1960

3a. Date of Last Report

04/15/1996

4. FEI Number

59-6173297

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WOLFE, GERTRUDE
206 RAYMOND HOBBS ST
P O BOX 52
MILTON FL 32572

10. Name and Address of New Registered Agent

81 Name Eulene Sheffield
82 Street Address (P.O. Box Number is Not Acceptable)
123 Sheffield Dr.
83
84 City Milton, FL 85 Zip Code FL 32571

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETENAME HOLLEY, BARBARA
STREET ADDRESS 1324 PINEVIEW CHURCH ROAD
CITY-ST-ZIP MILTON FL 32565TITLE PD ☒ DELETENAME PERRY, JOCILE C
STREET ADDRESS 5525 MEADOWLARK LANE
CITY-ST-ZIP MILTON FL 32570TITLE S ☐ DELETENAME MCWATERS, FAYE
STREET ADDRESS 214 CEDAR ST.
CITY-ST-ZIP MILTON FL 32570TITLE T ☒ DELETENAME WOLFE, GERTRUDE
STREET ADDRESS 206 RAYMOND HOBBS ST., P.O. BOX 52
CITY-ST-ZIP MILTON FL 32570TITLE D ☒ DELETENAME STREETER, SYLVIA
STREET ADDRESS 9604 SOUTH SELLERS DR.
CITY-ST-ZIP MILTON FL 32570TITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition1.2 NAME Jocile C. Perry
1.3 STREET ADDRESS 5525 Meadowlark Lane
1.4 CITY-ST-ZIP Milton, FL 325702.1 TITLE V ☒ Change ☐ Addition2.2 NAME Dean Williams
2.3 STREET ADDRESS 812 Mockingbird Lane
2.4 CITY-ST-ZIP Milton, FL 325703.1 TITLE ☐ Change ☐ Addition3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP4.1 TITLE T ☒ Change ☐ Addition4.2 NAME Eulene Sheffield
4.3 STREET ADDRESS 123 Sheffield Dr.
4.4 CITY-ST-ZIP Milton, FL 325715.1 TITLE D ☒ Change ☐ Addition5.2 NAME Floreine Cook
5.3 STREET ADDRESS 4556 Forsyth St. (P.O. Box 215)
5.4 CITY-ST-ZIP Bagdad, FL 325306.1 TITLE D ☐ Change ☒ Addition6.2 NAME Thelma Dukes
6.3 STREET ADDRESS 309 Conecuh St.
6.4 CITY-ST-ZIP Milton, FL 32570

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Eulene Sheffield
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER Eulene Sheffield

2/4/97 (904) 994-5416

CP2E037 (9/96)

TITLE

D

NAME

Jessie Maye Redmond

STREET ADDRESS

P. O. Box 48 N/A

CITY-ST-ZIP

Bagdad, FL 32530

TITLE

D

NAME

Florine Reklinski

STREET ADDRESS

1920 Blakemore Dr.

CITY-ST-ZIP

Milton, FL 32571

TITLE

D

NAME

Barbara Holley

STREET ADDRESS

1324 Pineview Church Rd.

CITY-ST-ZIP

Jay, Fl 32565

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