2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 19, 2007 8:00 am DOCUMENT # 704631 **Secretary of State** 1. Entity Name 02-19-2007 90054 015 ****61.25 PYRAMID CLUB, INC. Principal Place of Business Mailing Address 2047 WEST SOUTH STREET ORLANDO FL 32805 2047 WEST SOUTH STREET ORLANDO FL 32805 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 23-7218179 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 SIPLIN, GARY Street Address (P.O. Box Number is Not Acceptable) 5020 SILVER STAR ROAD ORLANDO FL 32808 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 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be П Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. IITLE Delete THEF ☐ Change ☐ Addition NAME NAME **BULLARD, FANNIE** STREET ADDRESS 2047 WEST SOUTH STREET STREET ADDRESS CITY-SI-ZIP CHY-ST-ZIP ORLANDO FL 32805 TITLE ☐ Delete TITLE Change ☐ Addition NAME BRADWELL, ELIZABETH NAME STREET ADDRESS STREET ADDRESS 4634 STARGELL PLACE CITY - S1-ZIP ORLANDO FL 32811 CITY-S1-ZIP HILE ☐ Defete HH ☐ Change Addition NAME KING, CHERYL B STREET ADDRESS STREET ADORESS 6585 WHIRLAWAY CIRCLE CITY-S1-ZIP ORLANDO FL 32818 CITY-SI-ZIP Delete TITLE Addition Betty Watson NAME BUTLER, MABLE 4704 Alham st Orlande, Fl 32811 STREET ADDRESS STREET ADORESS 1320 MABLE BUTLER BLVD CITY-S1-7IP ORLANDO FL 32805 CITY-ST-7tP ☐ Delete TITLE ☐ Addition NAME NAME BENJAMIN, JULIA STREET ADDRESS 2275 MENOMONEE COURT STREET ADDRESS CITY-S1-7IP ORLANDO FL 32818 CHY-ST-7P TITLE **RSEC** Delete TITLE ☐ Change Addition NAME NAML SMITH, LESSIE STREET ADDRESS 1032 W. JEFFERSON STREET, APT. # 1 STREET ADDRESS CITY-S1-ZIP CUTY-ST-7IP ORLANDO FL 32805

FILED

SIGNATURE: SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PROPERTY PAGE 1 107-423/330

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.