2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2007 8:00 am
Secretary of State
03-20-2007 90011 027 ****61.25

DOCUMENT # 725337

1. Entity Name
PILOT CLUB OF JACKSONVILLE, INC.

4UU30074

Principal Place of Business	Mailing Address
PO BOX 10544 JACKSONVILLE, FL 32207 US	P.O. BOX 10544 JACKSONVILLE, FL 32207 US

03152007 Chg-NP CR2E037 (12/06)

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

4. FEI Number 56-6013007 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BARRETT, CAROLYN
1531 LEBARON AVE.
JACKSONVILLE, FL 32207

7. Name and Address of New Registered Agent

Name: MARY STAHLER
Street Address (P.O. Box Number is Not Acceptable): 1266 LEBLANC Road
City: GREEN COVE SPRINGS FL Zip Code: 32043

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: Mary Stahler 3/14/2007
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, 2007

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HARRELL, SUE PRESIDE 2379 CEDAR SHORE CIRCLE JACKSONVILLE, FL 32210	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P. LEONARD, BARBARA 1529 HARBOUR CLUB DRIVE PONTE VEDRA BEACH, FL 32082	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BARRETT, CAROLYN TREASUE 1531 LEBARON AVE. JACKSONVILLE, FL 322078460	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MARY STAHLER 1266 LEBLANC Road GREEN COVE SPRINGS, FL 32043	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V LEONARD, BARBARA VICE PR 1529 HARBOUR CLUB DRIVE PONTE VEDRA BEACH, FL 32082	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP KARYL DESOUSA 3330 REMLER DR. E. JACKSONVILLE, FL 32223	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S TAYLOR, THERESE SECRETA 36 JARDIN DEMER PLACE JACKSONVILLE BEACH, FL 32250	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HEAD, JOAN DIRECTO 5969 HYDE PARK CIRCLE JACKSONVILLE, FL 32210	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHERRILL CASEY-BAKAI 9132 GLENDOWER COURT JACKSONVILLE, FL 32257	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DIAZ, MARY B DIRECTO 1949 SEVILLA BLVD W ATLANTIC BEACH, FL 32233	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KATHY MEADOWS 3023 Shady DRIVE JACKSONVILLE, FL 32257	☐ Change ☒ Addition

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: Mary Stahler 3/14/2007 (904) 384-1494
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #