2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

Mailing Address C/O STUART M. LILLY

2911 PORT BOULEVARD

MIAMI, FL 33132 US

DOCUMENT #728920

1. Entity Name

THE FLORIDA STATE PILOTS' ASSOCIATION INCORPORATED

Principal Place of Business

311 E PARK AVE

TALLAHASSEE, FL 32301



FILED Feb 09, 2007 08:00 AM Secretary of State



02072007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 23-7354479 Applied For Not Applicable

5. Certificate of Status Desired

\$8,75 Additional

Fee Required

6. Name and Address of Current Registered Agent

LILLY, STUART 2911 PORT BOULEVARD MIAMI, FL 33132

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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 entity.					
SIGNATURE Signary, species by less name of a futured again and the Tappicable URD Ex Registered Agains grained required viscon-original grained against a grained against the property of the Control of					
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Financing Trust Fund Contribution.	_ 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY ST ZIP	PD VISO, JORGE 2622 WEST CONLEY AVE TAMPA, FL 33611		00000630430 02/20/07-80006-022 70.00		
TITLE HAME STREET ADDRESS CITY ST ZIP	TD LILLY, STUART 2911 PORT BOULEVARD MIAMI, FL 33132				
TITLE RAME STREET ADDRESS CITY-ST-ZIP	SD MCDONNELL, MICHAEL 17420 SW 73RD COURT MIAMI, FL 33157			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY ST-ZIP	VD BROWN, JOSEPH 14852 PLUMOSA DR JACKSONVILLE BEACH, FL 32250		IN THIS SPACE		
TITLE NAME STREET ALKORESS CITY ST-ZHY	VD GASECKI, STEPHEN 2285 TANGLEWOOD LANE MERRITT ISLAND, FL 32953	·			
TITLE NAME STREET ADURESS CITY ST ZIP					
12. Thereby certify that the information supplied with this filling 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 changed, or on an attachment with an address with all other like empowered.

SIGNATURE: