NOT-FOR-PROFIT CORPORATION

Jul 12, 2004 8:00 am **UNIFORM BUSINESS REPORT (UBR) Secrétary of State** DOCUMENT # 735224 07-12-2004 90012 018 ****61.25 1. Entity Name Pilot Club of Drmond Beach In DO NOT WRITE IN THIS SPACE 44047783 2. Principal Place of Business 239 Ocean Shore Bloom 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Numbe Applied For mond Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 2176 USA Fee Required Name and Address of Current Registered Agent Ohnson DO NOT WRITE Street Address (P.O. Box Number is Not/Acceptable) cean IN THIS SPACE 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 (NOTE: Registered Agent signature required when reinstating) DATE Make Check Payable to FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Florida Department of State Initial or Amended UBR Added to Fees OFFICERS AND DIRECTORS 10. Joan Heuermann mr TITLE Bonner Ave NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Beach FL 32118 Johnson Charla 239 Ocean Shore Blud TITLE NAME NAME STREET ADDRESS STREET ADDRESS Ormand Beach FL 32176 CITY-ST-ZIP Fanning, Nancy TITLE TITLE NAME NAME 102 University Circle Drmond Beach FL 32176 Circle STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP Meredith Shirley IN THIS SPACE NAME * 56 SOCO Trail STREET ADDRESS STREET ADDRESS Drmond Beach FL 32174 CITY-ST-ZIP CITY-ST-ZIP TITLE NAME 46 Crestwood Circle STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Ormand Beach FL 32174

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 on an attachment with an address, with all other like empowered

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

uson Court

Onoday Janet

NAME

STREET ADDRESS

CITY-ST-ZIP

6/30/04 386

FILED

Attachments # 7355204 44047783

PILOT CLUB OF ORMOND BEACH, FLORIDA

P.O. Doi: 3873

Ormond Beach, Florida 32175-2873

Florida Department of State-

Please find enclosed check #252 for \$61.25.
Our club dropped the post office box last fall and in error, did not notify you.
Therefore, we did not receive the form to be filed for this year.
I called and one was sent- thank you.

Sincerely, Charla Johnson Treasurer