

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**

**Feb 25, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # 735224**

1. Entity Name

PILOT CLUB OF ORMOND BEACH, INC.



Principal Place of Business

152 HERNANDEZ AVENUE  
ORMOND BEACH FL 32174  
US

Mailing Address

152 HERNANDEZ AVENUE  
ORMOND BEACH FL 32174  
US



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

1st MOORE

CR2E037 (10/07)

4. FEI Number

23-7251071

Applied For  
No: Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BECKHAM, IRENE  
707 CORBIN PARK RD  
NEW SMYRNA BEACH FL 32168

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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**  
**Due By May 1, 2008**

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

TITLE NAME ☐ Delete  
P  
MILLER, MARTHA A  
STREET ADDRESS 152 HERNANDEZ AVENUE  
CITY-ST-ZIP ORMOND BEACH FL 32174

TITLE NAME ☐ Delete  
T  
BECKHAM, IRENE  
STREET ADDRESS 707 CORBIN PK RD  
CITY-ST-ZIP NEW SMYRNA BEACH FL 32168

TITLE NAME ☐ Delete  
D  
HEUERMANN, JOAN  
STREET ADDRESS 207 BONNER AVENUE  
CITY-ST-ZIP DAYTONA BEACH FL 32118

TITLE NAME ☐ Delete  
D  
BEVILLE, SHIRLEY  
STREET ADDRESS 26 WOODLAND BLVD  
CITY-ST-ZIP ORMOND BEACH FL 32174

TITLE NAME ☐ Delete  
RS  
FANNING, NANCY  
STREET ADDRESS 102 UNIVERSITY CIRCLE  
CITY-ST-ZIP ORMOND BEACH FL 32176

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

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.

SIGNATURE: *Irene Beckham Treas Irene Beckham Tr. 2-21-08 386.424-0846*