


FILE NOW: FILING FEE IS \$61.25

FILED  
Jun 19 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>	 FLORIDA DEPARTMENT OF STATE <i>John W. Morfitt</i> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **739656** (7)  
1. Corporation Name  
**FLORIDA DISTRICT INC. PILOT CLUB INTERNATIONAL.**



Principal Place of Business <b>1402 REDBUD CIR. PLANT CITY FL 33566 US</b>	Mailing Address <b>1402 REDBUD CIR. PLANT CITY FL 33566-8862 US</b>	3. Date Incorporated or Qualified <b>07/13/1977</b>	3a. Date of Last Report <b>05/01/1996</b>
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2. Principal Place of Business 21 <b>6533 Todd Road</b> Suite, Apt. #, etc.	2a. Mailing Address 26 <b>6533 Todd Road</b> Suite, Apt. #, etc.	4. FEI Number <b>NOT APPLICABLE</b>	Applied For Not Applicable
22 City & State <b>Jacksonville FL</b>	27 City & State <b>Jacksonville FL</b>	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
23 Zip <b>32216</b>	28 Country <b>Duval</b>	29 Zip <b>32216</b>	30 Country <b>Duval</b>
24 <b>32216</b>		25 <b>Duval</b>	
26 <b>32216</b>		27 <b>Duval</b>	
28 <b>32216</b>		29 <b>Duval</b>	
30 <b>32216</b>		31 <b>Duval</b>	

-9. Name and Address of Current Registered Agent <b>MILLER, NANCY 1402 REDBUD CIR. PLANT CITY FL 33566</b>		10. Name and Address of New Registered Agent 81 Name <b>Waggoner, Betty</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>6533 Todd Road</b> 83 84 City <b>Jacksonville</b> FL <b>FL</b> 85 Zip Code <b>32216</b>	
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **Betty Waggoner, Governor** 07-01-97  
(NOTE: Registered Agent signature required when re-instating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PD</b>	<input checked="" type="checkbox"/> DELETE	1.1 TITLE <b>Governor</b> <b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>MILLER, NANCY</b>		1.2 NAME <b>Waggoner, Betty</b>	
STREET ADDRESS <b>1402 REDBUD CIR.</b>		1.3 STREET ADDRESS <b>6533 Todd Road</b>	
CITY-ST-ZIP <b>PLANT CITY FL 33566</b>		1.4 CITY-ST-ZIP <b>Jacksonville FL 32216</b>	
TITLE <b>VD</b>	<input type="checkbox"/> DELETE	2.1 TITLE <b>Governor-Elect</b> <b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>WAGGONER, BETTY</b>		2.2 NAME <b>Linda Holden</b>	
STREET ADDRESS <b>6533 TODD RD</b>		2.3 STREET ADDRESS <b>4766 CR 118</b>	
CITY-ST-ZIP <b>JACKSONVILLE FL 32216</b>		2.4 CITY-ST-ZIP <b>Wildwood, FL 34785</b>	
TITLE <b>TD</b>	<input checked="" type="checkbox"/> DELETE	3.1 TITLE <b>Treasurer</b> <b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>TAYLOR, LESLIE</b>		3.2 NAME <b>May Edwards</b>	
STREET ADDRESS <b>P.O. BO 41AA</b>		3.3 STREET ADDRESS <b>3150 S. Fletcher #402</b>	
CITY-ST-ZIP <b>EARLTON FL</b>		3.4 CITY-ST-ZIP <b>Fernandina Beach FL 32034</b>	
TITLE <b>SD</b>	<input checked="" type="checkbox"/> DELETE	4.1 TITLE <b>Secretary</b> <b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>ROBERTS, ANN</b>		4.2 NAME <b>Sandra Magyar</b>	
STREET ADDRESS <b>1802 SOUTH PARK RD.</b>		4.3 STREET ADDRESS <b>1758 Waterbury Lane</b>	
CITY-ST-ZIP <b>PLANT CITY FL 33566</b>		4.4 CITY-ST-ZIP <b>Orange Park, FL 32073</b>	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)