

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2003 8:00 am
Secretary of State

04-29-2003 90064 009 ****61.25

DOCUMENT # **739656**

1. Entity Name

FLORIDA DISTRICT INC. PILOT CLUB INTERNATIONAL



Principal Place of Business

**2524 CHERRYWOOD LANE
TITUSVILLE FL 32780
US**

Mailing Address

**2524 CHERRYWOOD LANE
TITUSVILLE FL 32780
US**

10090642



2. Principal Place of Business

3181 Chaires Cross Rd

Suite, Apt. #, etc.

3. Mailing Address

3181 Chaires Cross Rd

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

Tallahassee FL

City & State

Tallahassee FL

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

Zip

32317

Country

USA

Zip

32317

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TUMBLIN, WINNIE
814 INDIAN RIVER AVE
TITUSVILLE FL 32780**

7. Name and Address of New Registered Agent

Name

Ann M. Freeman

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

2055 17th Street

City

Vero Beach

FL

Zip Code

32960

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

Ann M. Freeman

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/26/03

FILE NOW: FEE IS \$61.25

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	FDG TUMBLIN, WINNIE	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	814 INDIAN RIVER AVENUE	
CITY-ST-ZIP	TITUSVILLE FL 32780	
TITLE NAME	FDGE VENDRICK, JUDY	<input type="checkbox"/> Delete
STREET ADDRESS	30347 LETTINGWELL CIRCLE	
CITY-ST-ZIP	WESLEY CHAPEL FL 33543	
TITLE NAME	FDS PEDERSEN, CAROL	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	4093 WOODLAND CT	
CITY-ST-ZIP	MIMS FL 32754	
TITLE NAME	FDT RIGERMAN, CAROLYN	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	2524 CHERRYWOOD LANE	
CITY-ST-ZIP	TITUSVILLE FL 32780	
TITLE NAME	FDLG WHITE, CAROLYN	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	1587 SHERRIS LANE	
CITY-ST-ZIP	HOLLY HILL FL 32117	
TITLE NAME	FDLG PLAATJE, ALICE	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	521 RANDY LANE	
CITY-ST-ZIP	FORT MYERS BEACH FL 33931	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	Governor Elect / Director Ann M. Freeman	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	2055 17th Street	
CITY-ST-ZIP	Vero Beach FL 32960-3158	
TITLE NAME	Florida District Governor 2003	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME	Shirley-Jacques Secretary	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	3043 N. 1st Avenue	
CITY-ST-ZIP	Milton FL 32583	
TITLE NAME	Treasurer Charlotte Edenfield	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	3181 Chaires Cross Rd	
CITY-ST-ZIP	Tallahassee FL 32317	
TITLE NAME	Lt Governor / Director Lavelle Mount	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	4903 NW 41st Street	
CITY-ST-ZIP	Gainesville FL 32606	
TITLE NAME	Lt Governor / Director Carolyn Dill Collier	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	101 N. Rock Road	
CITY-ST-ZIP	Ft Pierce FL 34945-3438	

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Charlotte Edenfield* **4/26/03 (850) 894-3000**

CR2E037 (10/02)