2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F97000006414

1. Entity Name

PILOT CATASTROPHE SERVICES, INC.



Principal Place of Business

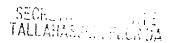
Mailing Address

708 OAK CIRCLE DR W MOBILE, AL 36609 PO BOX 91206 MOBILE, AL 36691-1206



FILED

06 FEB 28 PH 3: 35





DO NOT WRITE IN THIS SPACE

01132006

No Chg-P

CR2E034 (11/05)

4. FEI Number	Applied For
63-1012513	Not Applicabl
5. Certificate of Status Desired	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

SIGNATURE:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

the obligations of registered agent.							
SIGNATURE							
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIRECT	ORS					
TITLE	CEOP						
NAME	PILOT, W D JR						
STREET ADDRESS	708 OAK CIRCLE DRIVE WEST						
CITY-ST-ZIP	MOBILE, AL 36609				eagererone.		
TITLE	TSD			กลวิ	300067973663 16/0601017023 **150,00		
NAME	PILOT, E G			Q 50	IOLDO OTOTI OCO #4100*JO		
STREET ADDRESS	708 OAK CIRCLE DRIVE WEST						
CITY-ST-ZIP	MOBILE, AL 36609						
TITLE	VD						
NAME	PILOT, CURTIS F						
STREET ADDRESS	708 OAK CIRCLE DRIVE WEST			D0	NOT WOITE		
CITY-ST-ZIP	MOBILE, AL 36609			DO	NOT WRITE		
TITLE	VD			INI '	THIS SPACE		
NAME	PILOT, RODNEY A			11.4	INIS SPACE		
STREET ADDRESS	708 OAK CIRCLE DRIVE WEST						
CITY-ST-ZIP	MOBILE, AL 36609						
TITLE	VD						
NAME	FONDE, DAPHNE PILOT						
STREET ADDRESS	708 OAK CIR. DR. W.						
CITY-ST-ZIP	MOBILE, AL 36609	!					
TITLE							
NAME							
STREET ADDRESS							
CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filing 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if							

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