

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90069 040 ****61.25

2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

14004111



04052004 Chg-NP CR2E037 (10/03)

DOCUMENT # N02000003301					
1. Entity Name PILOT CLUB OF GREATER TAMPA, INC.					
Principal Place of Business 1443 WINDJAMMER LOOP LUTZ, FL 33549		Mailing Address 1443 WINDJAMMER LOOP LUTZ, FL 33549			
2. Principal Place of Business 3804 SHORESIDE CR.		3. Mailing Address 3804 SHORESIDE CR.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State TAMPA, FL.		City & State TAMPA, FL.		4. FEI Number 01-0679344	
Zip 33624		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WILSKY, LINDA 1443 WINDJAMMER LOOP FORT LAUDERDALE, FL 33359				7. Name and Address of New Registered Agent Name DOROTHY BIEGERT Street Address (P.O. Box Number is Not Acceptable) 3804 SHORESIDE CR. City TAMPA FL Zip Code 33624	
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 <u>DOROTHY BIEGERT, TRES.</u> <i>Dorothy Biegert</i> 4/12/04 Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		10. Check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KILLMERE, PHYLLIS PO BOX 192 DADE CITY, FL 33526 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COLES, PATRICIA 19134 CAUSEWAY BLVD. LAND O' LAKES, FL. 33639 ☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WILSKY, LINDA 1443 WINDJAMMER LOOP LUTZ, FL 33549 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PE VENDRICK, JUDY 30347 LETTINGWELL CR. WESLEY CHAPEL, FL. 33543 ☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DAVIS, RITA 4129 PRINTER DR LAND O' LAKES, FL 34639 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D BIEGERT, DOROTHY 3804 SHORESIDE CR. TAMPA, FL. 33624 ☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VENDERIK, HOWARD 30347 LETTINGHOUSE CIR ZEPHYRHILLS, FL 33543 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D GABBARD, MARSHA 29408 CADDY SHACK LANE SAN ANTONIO, FL. 33576 ☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, RHEA 24129 PAINTER DR LAND O' LAKES, FL 34639 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KILLMEYER, PHYLLIS P.O. BOX 192 SAN ANTONIO, FL. 33576 ☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD COLES, PAT PO BOX 2357 LAND O' LAKES, FL 34639 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
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: <i>Dorothy Biegert</i> 4/12/04 813 961-0659 Signature and typed or printed name of person signing on behalf of corporation Date Daytime Phone #					