2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2009
Secretary of State

DOCUMENT# N06000007866

Entity Name: PILOT CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

439 S FLORIDA AVE
SUITE 201
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3667
LAKELAND, FL 33802

New Mailing Address:

P.O. BOX 3667
LAKELAND, FL 33802 US

FEI Number: 20-5273194 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILSON, HERBERT W TRES
439 S. FLORIDA AVE.
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

WILSON, HERBERT W TRES
439 S. FLORIDA AVE.
SUITE 201
LAKELAND, FL 33801 US

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.

SIGNATURE: _____ 03/02/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GRIFFIN, JOHN C
Address: 439 S FLORIDA AVE SUITE 101
City-St-Zip: LAKELAND, FL 33801

Title: VD ( ) Delete
Name: MARTIN, BRANT C
Address: 439 S. FLORIDA AVE. SUTE 201
City-St-Zip: LAKELAND, FL 33801

Title: SD ( ) Delete
Name: ALLEN, EDWARD A
Address: 439 S FLORIDA AVE SUITE 301
City-St-Zip: LAKELAND, FL 33801

Title: TD ( ) Delete
Name: WILSON, HERBERT W
Address: 439 S FLORIDA AVE
City-St-Zip: LAKELAND, FL 33801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HERBERT W. WILSON TRES 03/02/2009
Electronic Signature of Signing Officer or Director — Date