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Mar 05 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N06596 (3)

1. Corporation Name

PILOT CLUB OF SUMTER COUNTY, INC.

Principal Place of Business

Mailing Address

P.O. BOX 580
WILDWOOD FL 34785P.O. BOX 580
WILDWOOD FL 347853. Date Incorporated or Qualified
12/12/19843a. Date of Last Report
04/24/19964. FEI Number
59-2351393Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, GWEN N
708 NORTH MAIN STREET
WILDWOOD FL 34785

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature: Typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DIRECTOR ☐ DELETE
NAME COX, MAXINE
STREET ADDRESS 4914 CR 117A
CITY - ST - ZIP WILDWOOD FL1.1 TITLE PRESIDENT ☐ Change ☒ Addition
1.2 NAME GWEN SMITH
1.3 STREET ADDRESS P.O. Box 420, 708 N MAIN ST
1.4 CITY - ST - ZIP Wildwood, FL. 34785-0420TITLE ☐ DELETE
NAME MARTIN, RUTH
STREET ADDRESS 11819 US HWY 301
CITY - ST - ZIP OXFORD FL2.1 TITLE SECRETARY ☐ Change ☒ Addition
2.2 NAME KATHRYN REYNOLDS
2.3 STREET ADDRESS P.O. Box 426 (116 B S. Commercial St.)
2.4 CITY - ST - ZIP Coleman, FL. 33521-0426TITLE ☒ Pres. Elected ☐ DELETE
NAME JOCHUM, DIANE
STREET ADDRESS 9260 CR 125B
CITY - ST - ZIP WILDWOOD FL3.1 TITLE DIRECTOR ☐ Change ☒ Addition
3.2 NAME GRACE FOWLER
3.3 STREET ADDRESS 9828 CR 121
3.4 CITY - ST - ZIP Wildwood, FL 34785TITLE ☒ DELETE
NAME SEIGLER, ROBERTA
STREET ADDRESS 607 E CLEVELAND
CITY - ST - ZIP WILDWOOD FL4.1 TITLE DIRECTOR ☐ Change ☒ Addition
4.2 NAME JENNIFER LEACHMAN
4.3 STREET ADDRESS 302 Denham St.
4.4 CITY - ST - ZIP Wildwood, FL. 34785TITLE ☒ DELETE
NAME PRIDGEON, ELAINE
STREET ADDRESS 4308 EMMAUS RD
CITY - ST - ZIP FRUITLAND PARK FL5.1 TITLE DIRECTOR ☐ Change ☒ Addition
5.2 NAME CANDICE HELT
5.3 STREET ADDRESS 615 FIRST AVE.
5.4 CITY - ST - ZIP WILDWOOD, FL. 34785TITLE ☒ DELETE
NAME DEUEL, LINDA
STREET ADDRESS 7473 CR 139
CITY - ST - ZIP WILDWOOD FL6.1 TITLE DIRECTOR ☐ Change ☒ Addition
6.2 NAME BETTY SMITH
6.3 STREET ADDRESS 510 S. Main St.
6.4 CITY - ST - ZIP Wildwood, FL. 34785

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.

SIGNATURE: *Gwen N. Smith, President*

1/8/97 (352) 748-0074

CR2E037 (9/96)



Pilot Club of Sumter County

Post Office Box 580

Wildwood, Florida 34785

Item #13

Addition - Kimberly Bernard - Director
302 Knight Ave.
Wildwood, FL. 34785