2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004770

FILED Apr 04, 2009 Secretary of State

Entity Name: THE PILOT FOUNDATION OF FORT MYERS BEACH, INC.

Current Principal Place of Business: New Principal Place of Business: 321 SEMINOLE WAY FT MYERS BEACH, FL 33931 **Current Mailing Address: New Mailing Address:** 321 SEMINOLE WAY P.O. BOX 2834 FT MYERS BEACH, FL 33931 FT MYERS BEACH, FL 33932 FEI Number: 20-8844354 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MULHOLLAND, NANCY MULHOLLAND, NANCY G 321 SEMINOLÉ WAY 321 SEMINOLE WAY FT MYERS BEACH, FL 33931 US FT MYERS BEACH, FL 33931 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: NANCY G. MULHOLLAND 04/04/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition OWEN, JUDY Name: Name: 6601 RANDY LANE Address: Address: City-St-Zip: FT MYERS BEACH, FL 33931 City-St-Zip: Title: () Delete Title: () Change () Addition RAYMOND, DONNA Name: Name: Address: 393 DONORA BLVD Address: City-St-Zip: FT. MYERS BEACH, FL 33931 City-St-Zip: Title: () Delete Title: (X) Change () Addition ELSBERG, GINNY G Name: PLAATJE, ALICE Name: 521 RANDY LANE Address: 5241 ESTERO BLVD. Address: City-St-Zip: FT. MYERS BEACH, FL 33931 City-St-Zip: FT. MYERS BEACH, FL 33931 () Change (X) Addition Title: () Delete Title: D Name: Name: BUTZER, JEANNE Address: Address: P.O. BOX 116 City-St-Zip: City-St-Zip: FT. MYERS BEACH, FL 33931 Title: () Delete Title: () Change (X) Addition SWANBECK, KAREN Name: Name: 3409 SHELL MOUND BLVD. Address: Address: City-St-Zip: City-St-Zip: FT. MYERS BEACH, FL 33931 Title: () Delete Title: () Change (X) Addition DUFFY, KATHLEEN Name: Name: Address: Address: 855 SAN CARLOS DRIVE FT. MYERS BEACH, FL 33931 City-St-Zip: 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: JUDY OWEN D 04/04/2009