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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N12381 (2)

1. Corporation Name

PILOT CLUB OF FORT MYERS BEACH, INC.

Principal Place of Business

Mailing Address

313 BAYLAND ROAD
FT MYERS BEACH FL 33431
US

313 BAYLAND ROAD
FT MYERS BEACH FL 33431
US

2. Principal Place of Business

2a. Mailing Address

21 P.O. Box 08156

26 P.O. Box 08156

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 FT. MYERS FL

27 FT. MYERS FL

City & State

City & State

23 33908 US

28 33908 US

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HENNEBERGER, NANCY S
313 BAYLAND ROAD
FT. MYERS BEACH FL 33931

81 Name CATHERINE RONRS

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

83 15136 ANCHORAGE WAY

84 City FT. MYERS FL 85 Zip Code 33908

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE CATHERINE RONRS

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Catherine Ronrs

4-5-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME WILLIAMS, PHYLLIS
STREET ADDRESS 1536 THORNTON ROAD
CITY - ST - ZIP FT. MYERS FL

1.1 TITLE P
1.2 NAME RIEVES, PHYLLIS
1.3 STREET ADDRESS 18468 CUTLASS
1.4 CITY - ST - ZIP FT. MYERS FL

☒ Change ☐ Addition

TITLE V
NAME RIEVES, PHYLLIS
STREET ADDRESS 18468 CUTLASS DRIVE
CITY - ST - ZIP FT. MYERS FL

2.1 TITLE VP
2.2 NAME SINDLER, TONI
2.3 STREET ADDRESS 17841 REBECCA AVE
2.4 CITY - ST - ZIP FT. MYERS, FL

☒ Change ☐ Addition

TITLE S
NAME SINDLER, TONI
STREET ADDRESS 17841 REBECCA AVE
CITY - ST - ZIP FT. MYERS FL

3.1 TITLE S.
3.2 NAME KAUFMAN, MARY JEAN
3.3 STREET ADDRESS 1339 WOODMERE LANE
3.4 CITY - ST - ZIP FT. MYERS, FL

☒ Change ☐ Addition

TITLE T
NAME HENNEBERGER, NANCY
STREET ADDRESS 313 BAYLAND ROAD
CITY - ST - ZIP FT. MYERS FL

4.1 TITLE T.
4.2 NAME CATHERINE RONRS
4.3 STREET ADDRESS 2113 TAMA CIRCLE #102
4.4 CITY - ST - ZIP NAPLES FL 33962

☒ Change ☐ Addition

TITLE D
NAME KAUFFMAN, MARY JEAN
STREET ADDRESS 1339 WOODMERE LANE
CITY - ST - ZIP FT. MYERS FL

5.1 TITLE D
5.2 NAME SIMPSON, BETTY
5.3 STREET ADDRESS 164 CULLEW ST
5.4 CITY - ST - ZIP FT. MYERS, FL

☒ Change ☐ Addition

TITLE D
NAME RAFFA, EDWINNA
STREET ADDRESS 400 RANDY LANE
CITY - ST - ZIP FT. MYERS FL

6.1 TITLE D
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP FT. MYERS FL

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: CATHERINE RONRS Catherine Ronrs 4-5-95 813-482-5769

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone