

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N12381

1. Entity Name

PILOT CLUB OF FORT MYERS BEACH, INC.

Principal Place of Business

400 RANDY LANE
FT. MYERS FL 33931
US

Mailing Address

BOX 2834
FT. MYERS BEACH FL 33932-2834
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2852448

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

EDWINA, RAFFA
400 RANDY LANE
FT MYERS BEACH FL 33931

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	PLAATJE, ALICE	
STREET ADDRESS	521 RANDY LANE	
CITY-ST-ZIP	FT MYERS BEACH FL 33931	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	PLAATJE, ALICE	
STREET ADDRESS	521 RANDY LANE	
CITY-ST-ZIP	FT MYERS BEACH FL 33931	
TITLE	S	<input type="checkbox"/> Delete
NAME	GRINTER, LISA	
STREET ADDRESS	111 FALKIRK ST	
CITY-ST-ZIP	FT MYERS BEACH FL 33931	
TITLE	T	<input type="checkbox"/> Delete
NAME	RAFFA, EDWINA	
STREET ADDRESS	400 RANDY LANE	
CITY-ST-ZIP	FT MYERS BEACH FL 33931	
TITLE	D	<input type="checkbox"/> Delete
NAME	HILL, BARBARA	
STREET ADDRESS	250 RANDY LANE	
CITY-ST-ZIP	FT MYERS BEACH FL 33908	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MATHEW, JEAN	
STREET ADDRESS	4451 ESTERO BLVD	
CITY-ST-ZIP	FT MYERS BEACH FL 33931	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Nancy Henneberger	
STREET ADDRESS	313 Bayland Rd	
CITY-ST-ZIP	FT Myers Beach, FL 33931	
TITLE	President Elect	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Barbara Hill	
STREET ADDRESS	250 Randy Lane	
CITY-ST-ZIP	FT. Myers Beach, FL 33931	
TITLE	Secretary	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lisa Grinter	
STREET ADDRESS	111 Falkirk St.	
CITY-ST-ZIP	FT. Myers Beach, FL 33931	
TITLE	Treasurer	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Edwina Raffa	
STREET ADDRESS	400 Randy Lane	
CITY-ST-ZIP	FT. Myers Beach, FL 33931	
TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Clerie Smith	
STREET ADDRESS	180 Egret St	
CITY-ST-ZIP	FT. Myers Beach, FL 33931	
TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lorie Wolf	
STREET ADDRESS	231 Egret St.	
CITY-ST-ZIP	FT. Myers Beach, FL 33931	

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:

Edwina Raffa
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jan 29, 2000 8:00 am
Secretary of State

01-29-2000 90101 047 ****61.25



DO NOT WRITE IN THIS SPACE

Jan. 19, 2000 (941) 463-506