

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 18, 2004 8:00 am**  
**Secretary of State**

02-18-2004 90006 046 \*\*\*\*61.25

**DOCUMENT # N12381**

1. Entity Name

**PILOT CLUB OF FORT MYERS BEACH, INC.**



Principal Place of Business

**180 EGRET ST.  
FT. MYERS BEACH FL 33931  
US**

Mailing Address

**BOX 2834  
FT. MYERS BEACH FL 33932  
US**

**54007955**



MOORE CR2E037 (11/03)

2. Principal Place of Business

**4351 Bay Beach Lane**

Suite, Apt. #, etc.

**#234**

City & State

**Fort Myers Beach, FL**

3. Mailing Address

Suite, Apt. #, etc.

City & State

4. FEI Number

**59-2852448**

Applied For

Not Applicable

Zip  
**33931**

Country  
**USA**

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**HOHMANN, CHERYL  
4198 BAY BEACH LANE #135  
FT MYERS BEACH FL 33931**

7. Name and Address of New Registered Agent

Name

**Margaret Schafer**

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

**500 Estero Boulevard**

**Apt. 696**

City

**Fort Myers Beach**

**FL**

Zip Code

**33931**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Margaret I. Schafer*

Treasurer - Margaret I. Schafer

2/10/04

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  
Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

|                |                           |  |
|----------------|---------------------------|--|
| TITLE          | PD                        | <input checked="" type="checkbox"/> Delete |
| NAME           | MULHOLLAND, NANCY         |  |
| STREET ADDRESS | 321 SEMINOLE WAY          |  |
| CITY-ST-ZIP    | FORT MYERS BEACH FL 33931 |  |
| TITLE          | D                         | <input checked="" type="checkbox"/> Delete |
| NAME           | WILLIAMS, PHYLLIS         |  |
| STREET ADDRESS | 15361 THORNTON RD         |  |
| CITY-ST-ZIP    | FORT MYERS FL 33908       |  |
| TITLE          | VPD                       | <input checked="" type="checkbox"/> Delete |
| NAME           | RAFFA, EDWINA             |  |
| STREET ADDRESS | 400 RANDY LANE            |  |
| CITY-ST-ZIP    | FORT MYERS BEACH FL 33931 |  |
| TITLE          | TD                        | <input type="checkbox"/> Delete            |
| NAME           | SCHAFER, MARGARET         |  |
| STREET ADDRESS | 500 ESTERO BLVD, #696     |  |
| CITY-ST-ZIP    | FORT MYERS BEACH FL 33931 |  |
| TITLE          | PED                       | <input checked="" type="checkbox"/> Delete |
| NAME           | CERECEDA, JOSEPHINE       |  |
| STREET ADDRESS | 4351 BAY BEACH LANE       |  |
| CITY-ST-ZIP    | FORT MYERS BEACH FL 33931 |  |
| TITLE          | D                         | <input checked="" type="checkbox"/> Delete |
| NAME           | LOOMIS, DENISE            |  |
| STREET ADDRESS | 185 JEFFERSON ST          |  |
| CITY-ST-ZIP    | FORT MYERS BEACH FL 33931 |  |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

|                |                            |  |
|----------------|----------------------------|--|
| TITLE          | PD                         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Cerceda, Josephine         |  |
| STREET ADDRESS | 4351 Bay Beach Lane #234   |  |
| CITY-ST-ZIP    | Fort Myers Beach, FL 33931 |  |
| TITLE          | VPD                        | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Williams, Phyllis          |  |
| STREET ADDRESS | 15361 Thornton Road        |  |
| CITY-ST-ZIP    | Fort Myers, FL 33908       |  |
| TITLE          | PED                        | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Loomis, Denise             |  |
| STREET ADDRESS | 185 Jefferson Street       |  |
| CITY-ST-ZIP    | Fort Myers Beach, FL 33931 |  |
| TITLE          | SD                         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Diaz, Laurie               |  |
| STREET ADDRESS | 260 Egret Street           |  |
| CITY-ST-ZIP    | Fort Myers Beach, FL 33931 |  |
| TITLE          | D                          | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Mulholland, Nancy          |  |
| STREET ADDRESS | 321 Seminole Way           |  |
| CITY-ST-ZIP    | Fort Myers Beach, FL 33931 |  |
| TITLE          | D                          | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Paris, Anna                |  |
| STREET ADDRESS | 370 Randy Lane             |  |
| CITY-ST-ZIP    | Fort 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:** *Margaret I. Schafer* **MARGARET I. SCHAFER** 2/10/04 239-463-5801  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **TREAS.**

Date Daytime Phone #

54067955-

Document #N12381  
Pilot Club of Fort Myers Beach, Inc.

**Additional Officers and Directors:**

|                            |          |
|----------------------------|----------|
| D                          | Addition |
| Bradford, Tammy            |          |
| 220 Curlew Street          |          |
| Fort Myers Beach, FL 33931 |          |

D. \_\_\_\_\_ Addition  
Butzer, Jeanne  
P. O. Box 116  
Fort Myers Beach, FL 33931

|                            |          |
|----------------------------|----------|
| D                          | Addition |
| Swanbeck, Karen            |          |
| 3409 Shell Mound Boulevard |          |
| Fort Myers Beach, FL 33931 |          |