2000 UNIFORM BUSINESS REPORT (UBR)

0078211

DOCUMENT # 701296

1. Entity Name

PROPELLER CLUB INC

FILED
00 APR 27 AM 8:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
3900 COMMONWEALTH BLVD MS 650. RM. 715C TALLAHASSEE FL 32399	3900 COMMONWEALTH BLVD MS 650. RM. 715C TALLAHASSEE FL 32399-6575

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
620 S. Meridian Street	620 S. Meridian Street
Suite, Apt. #, etc.: Room 235	Suite, Apt. #, etc.: Room 235
City & State: Tallahassee, FL	City & State: Tallahassee, FL
Zip: 32399-1600 Country: USA	Zip: 32399-1600 Country: USA

4. FEI Number: 59-6140262 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KIDD, CLIFFORD S 3900 COMMONWEALTH BLVD MS 650 TALLAHASSEE FL 32399	Name: Same Street Address (P.O. Box Number is Not Acceptable): 620 S. Meridian Street Room 235 City: Tallahassee **FL** Zip Code: 32399-1600

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD ELLINGSEN, DONALD N. 3900 COMMONWEALTH BLVD. TALLAHASSEE FL	☐ Delete	No change No change 620 S. Meridian Street, Room 235 Tallahassee, FL 32399-1600	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCD KIDD, CLIFFORD S 3900 COMMONWEALTH BLVD TALLAHASSEE FL	☐ Delete	No change No change 620 S. Meridian Street, Room 235 Tallahassee, FL 32399-1600	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SHELFER, L.W. 3900 COMMONWEALTH BLVD TALLAHASSEE FL	☐ Delete	No change No change 620 S. Meridian Street, Room 235 Tallahassee, FL 32399-1600	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T EARP,CURTIS D. 3900 COMMONWEALTH BLVD. TALLAHASSEE FL	☐ Delete	No change No change 620 S. Meridian Street, Room 235 Tallahassee, FL 32399-1600	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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CR2E037 (9/99)

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: Donald N. Ellingsen 4-26-00 850/488-5600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #