

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000009372

**FILED**  
**Oct 26, 2006**  
**Secretary of State**

**Entity Name:** PROPELLER CLUB OF THE UNITED STATES PORT OF PORT MANATEE, INC.

**Current Principal Place of Business:**

600 TAMPA BAY WAY  
PALMETTO, FL 34221

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 7300  
SUN CITY, FL 335867300

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

SHUSTA, TIMOTHY P  
100 SOUTH ASHLEY DRIVE, SUITE 1900  
TAMPA, FL 33602 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: TIMOTHY P SHUSTA

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SHEFFIELD, EDWARD  
Address: 764 KINGSTON CT.  
City-St-Zip: APOLLO BEACH, FL 33572

Title: D ( ) Delete  
Name: TYNDAL, STEVE  
Address: 300 REGAL CRUISE WAY, SUITE 1  
City-St-Zip: PALMETTO, FL 342216608

Title: D ( ) Delete  
Name: TAYLOR, AL  
Address: 1905 INTERMODAL CIRCLE, SUITE 310  
City-St-Zip: PALMETTO, FL 34221

Title: D ( ) Delete  
Name: FORE, MELANIE  
Address: 13252 EASTERN AVE.  
City-St-Zip: PALMETTO, FL 34221

Title: D ( ) Delete  
Name: DOERR, JOHN  
Address: 804 N. DOCK ST.  
City-St-Zip: PALMETTO, FL 34221

Title: D ( ) Delete  
Name: MONDOR, STACY  
Address: 1905 INTERNATIONAL CIRCLE, SUITE 216  
City-St-Zip: PALMETTO, FL 34221

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: STEVE TYNDAL

D

10/26/2006

Electronic Signature of Signing Officer or Director

Date