

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001465

FILED  
Apr 29, 2009  
Secretary of State

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

**Current Principal Place of Business:**

P.O. BOX 01-2438  
MIAMI, FL 331012438

**New Principal Place of Business:**

2000 SOUTH DIXIE HIGHWAY  
SUITE 113  
MIAMI, FL 33133

**Current Mailing Address:**

P.O. BOX 01-2438  
MIAMI, FL 331012438

**New Mailing Address:**

**FEI Number:** 65-0409445

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KELLEY, ALLAN R  
100 SE 2ND ST  
17TH FLOOR  
MIAMI, FL 33131 US

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

FIELD, STEPHEN D  
2000 SOUTH DIXIE HIGHWAY  
SUITE 113  
MIAMI, FL 33133 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: STEPHEN D. FIELD

04/29/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SKIPP, PETER  
Address: 2215 NW 14TH STREET  
City-St-Zip: MIAMI, FL 33125

Title: VD ( ) Delete  
Name: BENSCH, SANDRA  
Address: 1032 NE LITTLE RIVER DRIVE  
City-St-Zip: MIAMI, FL 33138

Title: SD ( ) Delete  
Name: FIELD, STEVE  
Address: PO BOX 01-2438  
City-St-Zip: MIAMI, FL 33101

Title: VP2 ( ) Delete  
Name: COOPER, JONATHAN  
Address: PO BOX 01-2438  
City-St-Zip: MIAMI, FL 33101

**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:

I hereby certify that the information supplied with this filing does not qualify 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: STEPHEN D. FIELD

SD

04/29/2009

Electronic Signature of Signing Officer or Director

Date