

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006115

FILED  
Mar 26, 2009  
Secretary of State

**Entity Name:** PRATT & WHITNEY AIRCRAFT FLORIDA OPERATIONS EMPLOYEES' CLUB, INC.

**Current Principal Place of Business:**

STATE RD. 710  
17900 BEELINE HWY  
JUPITER, FL 33478

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 109600  
M/S716-08  
WEST PALM BEACH, FL 33410

**New Mailing Address:**

**FEI Number:** 65-0177147

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EVANS, REBECCA A CPA  
712 US HIGHWAY ONE  
SUITE 210  
NORTH PALM BEACH, FL 33408 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: MAUS, JAMES  
Address: 17900 BEELINE HIGHWAY  
City-St-Zip: JUPITER, FL 33478

Title: D ( ) Delete  
Name: MAHER, PHYLLIS  
Address: 17900 BEELINE HIGHWAY  
City-St-Zip: JUPITER, FL 33478

Title: SEC ( ) Delete  
Name: WUNDERLICH, STEVEN  
Address: 17900 BEELINE HWY  
City-St-Zip: JUPITER, FL 33478

Title: VP ( ) Delete  
Name: BOND, LLINDSEY  
Address: 17900 BEELINE HIGHWAY  
City-St-Zip: JUPITER, FL 33478

Title: T ( ) Delete  
Name: LA GRANGE, JUDITH  
Address: 17900 BEELINE HIGHWAY  
City-St-Zip: JUPITER, FL 33478

Title: D ( ) Delete  
Name: MILLS, PATRICIA  
Address: 17900 BEELINE HIGHWAY  
City-St-Zip: JUPITER, FL 33478

**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 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: PHYLLIS A. MAHER

MGR.

03/26/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date