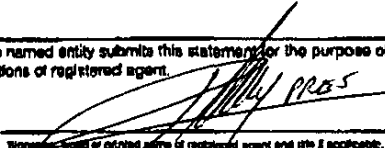
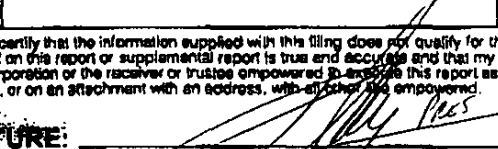


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90087 016 ****70.00

DOCUMENT # N05000009955					
1. Entity Name 816 PROSPERITY CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1800 B. SOUTH DIXIE HIGHWAY WEST PALM BEACH, FL 33401			Mailing Address 1800 B. SOUTH DIXIE HIGHWAY WEST PALM BEACH, FL 33401		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Subs. Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
4. FEI Number APPLIED FOR				Applied For Not Applicable	
5. Certificate of Status Desired ☐				58.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CRAFT, DAVID W. 3418 POINSETTIA AVE. WEST PALM BEACH, FL 33407				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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  <u>Pascal LEVY</u> 04/06/07					
(NOTE: Registered Agent signature required when replacing)					
Filing Fee is \$61.25 Due by May 1, 2007			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE	D	LEVY, PASCAL	☐ Delete		
NAME					
STREET ADDRESS		1800 B. SOUTH DIXIE HIGHWAY			
CITY - ST - ZIP		WEST PALM BEACH, FL 33401			
TITLE	D	CASSIDY, CAROLINE	☐ Delete		
NAME					
STREET ADDRESS		1800 B. SOUTH DIXIE HIGHWAY			
CITY - ST - ZIP		WEST PALM BEACH, FL 33401			
TITLE	D	CRAFT, DAVID W	☐ Delete		
NAME					
STREET ADDRESS		3418 POINSETTIA AVENUE			
CITY - ST - ZIP		WEST PALM BEACH, FL 33407			
TITLE			☐ Delete		
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE			☐ Delete		
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE			☐ Delete		
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE			☐ Change ☐ Addition		
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE			☐ Change ☐ Addition		
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE			☐ Change ☐ Addition		
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE			☐ Change ☐ Addition		
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 not employed.					
SIGNATURE:  <u>Pascal LEVY</u> 04/06/07					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date					
Daytime Phone #					

FEI # 20/5738029



02202007 Chg-NP CR2E037 (12/06)