

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702192

FILED
Apr 01, 2009
Secretary of State

Entity Name: NASSAU SQUARE APARTMENTS INC

Current Principal Place of Business:

381 SOUTH LAKE DRIVE
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

PO BOX 2319
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 59-0815421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAEL BERIRO, P.A.
205 WORTH AVENUE
SUITE 310
PALM BEACH, FL 33480 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: VPD () Delete
Name: MILLER, EDGAR
Address: 381 SOUTH LAKE DRIVE #16
City-St-Zip: PALM BEACH, FL 33480

Title: D () Delete
Name: CORBIN, ROBERT
Address: 281 SOUTH LAKE DRIVE #12
City-St-Zip: PLAM BEACH, FL 33480

Title: SD () Delete
Name: PRICE, HENRY
Address: 381 SOUTH LAKE DRIVE #7-8
City-St-Zip: PLAM BEACH, FL 33480

Title: PD () Delete
Name: VAKOUTIS, JOHN
Address: 381 SOUTH LAKE DRIVE #4
City-St-Zip: PALM BEACH, FL 33480

Title: TD () Delete
Name: TENHAVE, ROBERT
Address: 381 SOUTH LAKE DRIVE #17
City-St-Zip: PALM BEACH, FL 33480

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:

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: JOHN VAKOUTIS

PD

04/01/2009

Electronic Signature of Signing Officer or Director

Date