## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 709048** 

Entity Name: THE PROSPEROS

**FILED** Aug 31, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4234 OVERLAND AVE. PO BOX 4969

PO BOX 4969 CULVER CITY, CA 902313736

**CULVER CITY, CA 902303736** 

**New Mailing Address: Current Mailing Address:** 

4234 OVERLAND AVE PO BOX 4969

PO BOX 4969 CULVER CITY, CA 902313736 **CULVER CITY, CA 902303736** 

FEI Number: 23-7282544 FEI Number Applied For ( ) FEI Number Not Applicable ( )

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:

MCNEIL, RON 1799 SEMINOLE BLVD #45 LARGO, FL 33778

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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete TANSWELL, PAUL BOLLMAN, ANNE Name: Name:

4234 OVERLAND AVE Address: PO BOX 4969 Address:

City-St-Zip: CULVER CITY, CA 90230 City-St-Zip: CULVER CITY, CA 90231

Title: VD () Delete Title: (X) Change ( ) Addition MALANAPHY, HUGH JOHN Name: MALANAPHY, HUGH JOHN Name:

Address: 4234 OVERLAND AVE Address: PO BOX 4969

City-St-Zip: CULVER CITY, CA 90230 City-St-Zip: CULVER CITY, CA 90231

Title: () Delete Title: SD (X) Change ( ) Addition CARTER, CAROL CARTER, CAROL Name: Name:

4234 OVERLAND AVE Address: Address: PO BOX 4969 City-St-Zip: CULVER CITY, CA 90230 City-St-Zip: CULVER CITY, CA 90231

Title: ( ) Delete Title: (X) Change ( ) Addition

Name: BOLLMAN, ANNE Name: TANSWELL, PAUL 11730 WASHINGTON BLVD #15 Address: Address: PO BOX 4969

City-St-Zip: LOS ANGELES, CA 90066 City-St-Zip: CULVER CITY, CA 90231

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANNE BOLLMAN PD 08/31/2005