

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749666

FILED
Jan 06, 2009
Secretary of State

Entity Name: PROSPERITY BAY VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O BETSY MASCARO, ACCT.
840 U.S HWY ONE #415
N. PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

C/O BETSY MASCARO, ACCT.
840 U.S HWY ONE #415
N. PALM BEACH, FL 33408

New Mailing Address:

FEI Number: 59-2410816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASCARO, BETSY A.
840 US HWY ONE STE 415
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: P () Delete
Name: KEISER, TODD
Address: 2464 BAY VILLAGE CT
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: T () Delete
Name: TEAFORD, JON
Address: 2365 PROSPERITY BAY CT
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP () Delete
Name: GEORGE, ALENE
Address: 2442 BAY VILLAGE CT
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: S () Delete
Name: RUSHFELDT, BETTY
Address: 2358 BAY VILLAGE CT
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: TEAFORD, JON
Address: 2365 PROSPERITY BAY CT
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP (X) Change () Addition
Name: BETTY, RUSHFELDT
Address: 2358 BAY VILLAGE CT
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: T (X) Change () Addition
Name: DEVON, BURDEN
Address: 2276 BAY VILLAGE CT
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: TODD KEISER

P

01/06/2009

Electronic Signature of Signing Officer or Director

Date