2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002103

Entity Name: PROPCO, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
3960 RCA BLVD. SUITE 6002 PALM BEACH GARDENS, FL 33410			3980 RCA BLVD. SUITE 8012 PALM BEACH GARDENS, FL 33410				
Current Mailing Address:				New Mailing Address:			
3960 RCA BLVD. SUITE 6002 PALM BEACH GARDENS, FL 33410			3980 RCA BLVD. SUITE 8012 PALM BEACH GARDENS, FL 33410				
FEI Number:	75-2619478	FEI Number Applied For ()	FEI Nur	nber Not Appli	icable ()	Certificate of Status	Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
1200 S PINI SUITE 105 PLANTATIO	RATION SYST E ISLAND RD DN, FL 33324 Damed entity su		rpose o	if changing it	ts reaistered of	ffice or registered a	agent or both
in the State		is the statement for the par	, pooc o	. changing ii	io rogiotoroa oi	mee or regionered t	agont, or both,
SIGNATUR	E:						
Electronic Signature of Registered Agent Date							
Election Cam	paign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () C WERTHEIM, RAM 113 KING STREE ARMONK, NY 10	T		Title: Name: Address: City-St-Zip:	P (X) WENTWORTH, 750 MAIN STRE HARTFORD, CT	ET SUITE 1002	
Title: Name: Address: City-St-Zip:	MIRANDA, JAMES 3960 RCA BOULE	elete S R EVARD, SUITE 6002 RDENS, FL 33410		Title: Name: Address: City-St-Zip:	RUDY, LINDA S 398- RCA BOUL	Change () Addition EVARD, SUITE 8012 ARDENS, FL 33410	
Title: Name: Address: City-St-Zip:	D () D BUDNICK, NEIL C 113 KING STREE ARMONK, NY 10	T		Title: Name: Address: City-St-Zip:	S (X) DARIUS, JOEY- 750 MAIN STRE HARTFORD, CT	ET SUITE 1002	
Title: Name: Address: City-St-Zip:	WENTWORTH, B	RIVE 3RD FLOOR		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	GUNDERSEN, GE 3960 RCA BLVD.			Title: Name: Address: City-St-Zip:	()	Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOEY-LYNN D. DARIUS S 04/30/2007