

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007590

FILED
May 14, 2009
Secretary of State

Entity Name: PRODIGAL S. & D. CORPORATION

Current Principal Place of Business:

4140 SW 70 TERRACE
DAVIE, FL 33314

New Principal Place of Business:

Current Mailing Address:

4611 S. UNIVERSITY DR,
SUITE 406
DAVIE, FL 33328 38

New Mailing Address:

4611 S. UNIVERSITY DR,
SUITE 406
DAVIE, FL 33328

FEI Number: 59-3751366

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:

STEVENS, FREDA N
4611 S. UNIVERSITY DRIVE
SUITE 406
DAVIE, FL 33328 US

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: PDS () Delete
Name: STEVENS, FREDA N
Address: 4611 S. UNIVERSITY DR, SUITE 406
City-St-Zip: DAVIE, FL 33328

Title: S () Delete
Name: SHERMAN, CLEMENTINE P
Address: 17024 NW 20TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VP () Delete
Name: STEVENS, DARIC A
Address: 4611 S. UNIVERSITY DR, SUITE 406
City-St-Zip: DAVIE, FL 33328

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: SHERMAN, CLEMENTINE P
Address: 17024 NW 20TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VPD (X) Change () Addition
Name: STEVENS, DARIC A
Address: 4611 S. UNIVERSITY DR, SUITE 406
City-St-Zip: DAVIE, FL 33328

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: /FREDASTEVENSI

PDS

05/14/2009

Electronic Signature of Signing Officer or Director

Date