

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010840

FILED
Mar 12, 2009
Secretary of State

Entity Name: PRESTIGE CLUB OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

7 ROYAL PALM WAY
SUITE #209
BOCA RATON, FL 33432 US

New Principal Place of Business:

Current Mailing Address:

7 ROYAL PALM WAY
SUITE #209
BOCA RATON, FL 33432 US

New Mailing Address:

FEI Number: 42-1680349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORMAN, THEODORE ESQ.
334 NORTHEAST 1ST AVENUE
DELRAY BEACH, FL 33444 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: D () Delete
Name: DEVINE, GINA M
Address: 2300 NORTHWEST 48TH STREET
City-St-Zip: COCONUT CREEK, FL

Title: D () Delete
Name: DOWD, DAN
Address: 1002 EAST NEWPORT CENTER DRIVE #203
City-St-Zip: DEERFIELD BEACH, FL 33432 US

Title: D () Delete
Name: FORMAN, THEODORE
Address: 334 NORTHEAST 1ST AVENUE
City-St-Zip: DELRAY BEACH, FL

Title: D () Delete
Name: GREENBERGER, STEPHEN
Address: 2450 HOLLYWOOD BOULEVARD, SUITE 105
City-St-Zip: HOLLYWOOD, FL

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:

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: DANIEL DOWD

TREA

03/12/2009

Electronic Signature of Signing Officer or Director

Date