

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 14, 2005 8:00 am
Secretary of State

03-14-2005 90094 033 ****61.25

DOCUMENT # N97000006096

1. Entity Name

PROLOGUE SOCIETY OF PALM BEACH COUNTY, INC.



Principal Place of Business

11301 U.S. HWY ONE
C/O NORTHERN TRUST BANK
NORTH PALM BEACH FL 33408

Mailing Address

11301 U.S. HWY ONE
C/O NORTHERN TRUST BANK
NORTH PALM BEACH FL 33408

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



1st MOORE

CR2E037 (10/04)

4. FEI Number

65-0792630

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SACHER, CHARLES P
2655 LEJEUNE ROAD, #1101
CORAL GABLES FL

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME SEYMOUR, GORT
STREET ADDRESS 13725 LE HAVRE DRIVE
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE ☐ Change ☒ Addition
NAME Secretary/Treas
NAME Jacqueline Gerbus
STREET ADDRESS 11301 U.S. Hwy One
CITY-ST-ZIP North Palm Beach FL 33408

TITLE D ☐ Delete
NAME REGAN, DOUGLAS P
STREET ADDRESS 301 YAMATO ROAD
CITY-ST-ZIP BOCA RATON FL 33431

TITLE ☐ Change ☒ Addition
NAME D Sandra Sweetman
STREET ADDRESS 11301 U.S. Hwy One
CITY-ST-ZIP North Palm Beach FL 33408

TITLE DST ☐ Delete
NAME BRACCI, MICHAEL J
STREET ADDRESS 11301 U S HIGHWAY ONE
CITY-ST-ZIP NORTH PALM BEACH FL 33408

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME CORBETT, DAN
STREET ADDRESS 14253 U.S. HWY. 1
CITY-ST-ZIP JUNO BEACH FL 33408

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME CRARY, RICK II
STREET ADDRESS 722 S.W. KEATS AVE
CITY-ST-ZIP PALM CITY FL 34990

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME RAMELL, RICHARD
STREET ADDRESS 122 NO. CANTY RD
CITY-ST-ZIP PALM BEACH FL 33480

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jacqueline L Gerbus
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jacqueline L Gerbus

3/10/05 (SU1)
622-4600

Date

Daytime Phone #