. 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 06, 2006 8:00 am **Secretary of State** DOCUMENT # N97000006096 1. Entity Name 03-06-2006 90034 028 ****61.25 PROLOGUE SOCIETY OF PALM BEACH COUNTY, INC. Principal Place of Business Mailing Address 11301 U.S. HWY ONE C/O NORTHERN TRUST BANK 11301 U.S. HWY ONE C/O NORTHERN TRUST BANK NORTH PALM BEACH FL 33408 NORTH PALM BEACH FL 33408 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City-&-State--City & State 4. FEI Number Applied For 65-0792630 Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SACHER, CHARLES P Street Address (P.O. Box Number is Not Acceptable) 2655 LEJEUNE ROAD, #1101 CORAL GABLES 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 regimed when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE Addition ☐ Channe Jonathan Brookshire SEYMOUR, GORT NAME NAME 11301 U.S. Hwy one 13725 LE HAVRE DRIVE STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 33410 Norm Palm Beach FL 33480 CHY-ST-ZIP CITY - ST - ZIP Delete ☐ Addition TITLE TITLE ☐ Change REGAN, DOUGLAS P MAME NAME 301 YAMATO ROAD STREET ADDRESS STREET ADDRESS BOCA RATON FL 33431 CITY-ST-ZIP CITY-ST-ZIP TITLE DST ☐ Delete TITLE ☐ Change Addition BRACCI, MICHAEL J NAME STREET ADDRESS 11301 U S HIGHWAY ONE STREET ADDRESS NORTH PALM BEACH FL 33408 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition CORBETT, DAN NAME NAME STREET ADDRESS 14253 U.S. HWY. 1 STREET ADDRESS CITY-ST-ZIP JUNO BEACH FL 33408 CITY-ST-ZIP TITLE ☐ Delete THILE Change Addition CRARY, RICK II NAME NAME 722 S.W. KEATS AVE STREET ADDRESS STREET ADDRESS PALM CITY FL 34990 CITY-ST-ZIP CITY-ST-ZIP GERBUS THILE ☐ Delete TITLE Change ☐ Addition GEROD, JACQUELINE NAME NAME 11301 US HWY ONE STREET ADDRESS STREET ADDRESS NORTH PALM BEACH FL 33408 CITY-ST-7IP CITY-ST-ZIP

FILED

signature: Doyuli A. Sutur Jacq/cline Gerbus 2/17/06 (50) 803-7575

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. 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