## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000001002

Entity Name: PROSPERITY VENTURES, INC.

FILED May 05, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

11181 ELLISON WILSON RD NORTH PALM BEACH, FL 33408

**Current Mailing Address: New Mailing Address:** 

11181 ELLISON WILSON RD 4413 SW MARTIN HIGHWAY NORTH PALM BEACH, FL 33408 PALM CITY, FL 34990

FEI Number: 65-1061610 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCCRACKEN, JOHN B TASINI, OREN ESQ 505 SOUTH FLAGLER DRIVE 660 US HIGHWAY ONE THIRD FLOOR **SUITE 1100** WEST PALM BEACH, FL 33401 US NORTH PALM BEACH, FL 33408 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: OREN TASINI 05/05/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

KLEILA, JUDE T Name: Name: KLEILA, JUDE T

11181 ELLISON WILSON ROAD 11181 ELLISON WILSON ROAD Address: Address: City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip: NORTH PALM BEACH, FL 33408

( ) Delete Title: Title: (X) Change ( ) Addition

Name: KLEILA, LINDA J Name: KLEILA, LINDA J

7741 NORTHTREE WAY 2197 SW MAINSAIL TERRACE Address: Address:

LAKE WORTH, FL 33467 STUART, FL 34997 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LINDA KLEILA S/T 05/05/2005