## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000120838

Entity Name: PRESTIGE PROPERTIES OF SOUTH FLORIDA, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4947 TAMIAMI TRAIL N. #106 NAPLES, FL 34103

Current Mailing Address: New Mailing Address:

4947 TAMIAMI TRAIL N. #106 NAPLES, FL 34103

FEI Number: 57-1138242 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:

SEGRAVES, VANESSA
2026 PRINCE DR.
NAPLES, FL 34110 US
SEGRAVES, WARREN
2026 PRINCE DR.
NAPLES, FL 34110 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: WARREN SEGRAVES 04/29/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: PSTD (X) Change () Addition Name: SEGRAVES, VANESSA Name: SEGRAVES, WARREN Address: 2026 PRINCE DR. Address: 2026 PRINCE DR.

 2026 PRINCE DR.
 Address:
 2026 PRINCE DR.

 NAPLES, FL 34110
 City-St-Zip:
 NAPLES, FL 34110

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

 Name:
 SEGRAVES, WARREN L
 Name:
 SEGRAVES, VANESSA

 Address:
 2026 PRINCE DR.
 Address:
 2026 PRINCE DR.

 City-St-Zip:
 NAPLES, FL 34110
 City-St-Zip:
 NAPLES, FL 34110

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

Name: PETERS, LARRY D
Address: Address: 2126 HIGHLAND SPRINGS PLA

 Address:
 Address:
 2126 HIGHLAND SPRINGS PLACE

 City-St-Zip:
 City-St-Zip:
 LOUISVILLE, KY 40245

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

 Name:
 Name:
 BELZ, MELISSA G

 Address:
 Address:
 1520 BLUE POINT AVE #103

 City-St-Zip:
 VAPLES, FL 34102

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WARREN SEGRAVES PSTD 04/29/2008