

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000019691

FILED
Apr 30, 2009
Secretary of State

Entity Name: PLANTATION TOWNE SQUARE, INC.

Current Principal Place of Business:

1655 DREXEL AVE SUITE 208
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1655 DREXEL AVE SUITE 208
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 65-0565666

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAPPORT, MORRIS
1655 DREXEL AVE SUITE 208
MIAMI BEACH, FL 33139 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RAPPORT, MORRIS
Address: 1655 DREXEL AVE SUITE 208
City-St-Zip: MIAMI BEACH, FL 33139

Title: T () Delete
Name: RAPPORT, SUSY
Address: 1655 DREXEL AVE SUITE 208
City-St-Zip: MIAMI BEACH, FL 33139

Title: VSD () Delete
Name: ROSENBERG, JEFFREY
Address: 1655 DREXEL AVE SUITE 208
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: RAPPORT, ROBERT
Address: 1655 DREXEL AVE STE 208
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: LILLIAN, ROSENBERG
Address: 1655 DREXEL AVE STE 208
City-St-Zip: MIAMI BEACH, FL 33139

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:

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

SIGNATURE: MORRIS RAPPORT

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date