

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47307

FILED
May 01, 2013
Secretary of State
CC0823186286

Entity Name: THE PROLOGUE SOCIETY, INC.

Current Principal Place of Business:

C/O NORTHERN TRUST COMPANY
700 BRICKELL AVE
MIAMI, FL 33131

Current Mailing Address:

C/O NORTHERN TRUST COMPANY
700 BRICKELL AVE
MIAMI, FL 33131

FEI Number: 65-0334615

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SACHER, CHARLES PESQ
SACHER, MARTINI & SACHER, P.A.
2655 LEJEUNE RD, SUITE 1101
CORAL GABLES, FL 33134 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name MCCABE, ARVA P
Address 1601 S. MIAMI AVENUE
City-State-Zip: MIAMI FL 33129

Title D
Name RUWITCH, ROBERT
Address 601 BRICKELL KEY DRIVE, APT 505
City-State-Zip: MIAMI FL 33131

Title D/ST
Name CRUZ, DIANE
Address 1119 NW 161 AVE
City-State-Zip: HOLLYWOOD FL 33028

Title D
Name BLECHMAN, WIL
Address 5250 SW 84TH STREET
City-State-Zip: MIAMI FL 33143

Title D
Name BANDER, MICHAEL
Address 500 ALHAMBRA CIRCLE
City-State-Zip: MIAMI FL 33134

Title D
Name MARCHMAN, RAY
Address 520 BRICKELL KEY DRIVE, PH00
City-State-Zip: MIAMI FL 33131

Title CHARIMAN
Name KLEINBERG, HOWARD
Address 14520 SW 79TH COURT
City-State-Zip: PALMETTO BAY FL 33158

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DIANE CRUZ

SECRETARY/DIRECTOR

05/01/2013

Electronic Signature of Signing Officer/Director Detail

Date