

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 367548

FILED
Feb 24, 2006
Secretary of State

Entity Name: BOCA ROYALE GOLF REALTY, INC.

Current Principal Place of Business:

1 SOUTH GOLFVIEW DRIVE
ENGLEWOOD, FL 34223

New Principal Place of Business:

Current Mailing Address:

1 SOUTH GOLFVIEW DRIVE
ENGLEWOOD, FL 34223

New Mailing Address:

FEI Number: 59-1301738

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, ANDREW M
1 SOUTH GOLFVIEW DRIVE
ENGLEWOOD, FL 34223 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: THOMPSON, GEORGE R JR
Address: 1 SO. GOLFVIEW DRIVE
City-St-Zip: ENGLEWOOD, FL 34223

Title: D () Delete
Name: THOMPSON, GEORGE R JR
Address: 1 SO. GOLFVIEW DRIVE
City-St-Zip: ENGLEWOOD, FL 34223

Title: VP () Delete
Name: THOMPSON, ANDREW M.,
Address: #1 S. GOLFVIEW DRIVE
City-St-Zip: ENGLEWOOD, FL

Title: () Delete
Name:
Address:
City-St-Zip:

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: S () Change (X) Addition
Name: NELSON, ANN SCOTT,
Address: 5010 WEST LEONA STREET
City-St-Zip: TAMPA, FL 33629

I hereby certify that the information supplied with this filing does not qualify for the 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: ANDREW M THOMPSON

VP

02/24/2006

Electronic Signature of Signing Officer or Director

_____ Date