**FILED** 

05-10-2001 90038 034 \*\*\*\*61.25

May 10, 2001 8:00 am Secretary of State

**DOCUMENT # 712167** 

1. Entity Name

THE ROYAL POINCIANA CHAPEL, INC.

Principal Place of Business
60 COCOANUT ROW

City & State

Zip

Mailing Address

PALM BEACH FL 33480 PIT.

60 COCOANUT ROW PALM BEACH FL 33480

2.	Principal Place of Business
	•
	Suite, Apt, #, etc.

Suite, Apt. #, etc.

City & State

3. Mailing Address

Country is 5. Certificate of Status Desired

6. Name and Address of Current Registered Agent

Street Ad**d**ress (PtO; Box Number is Not Acceptable) 60 Cocoanut Row

City Palm Beach

CHRISTIAN, NANCY. **60 COCOANUT ROW** PALM BEACH FL 33480

SIGNATURE

Signature, typed or printed nar

FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Delete TITLE P NAME PANNILL, WILLIAM G NAME PANNILL, WILLIAM G. STREET ADDRESS 4 S LAKE TRAIL STREET ADDRESS 4 S. LAKE TRAIL CITY-ST-ZIP CITY-ST-ZIP PALM BEACH FL 33480 PALM BEACH, FL 33480 TITI F TITI F XXDelete NAME CHRISTIAN, NANCY NAME RINKER, JOHN J. 380 COLUMBIA DRIVE, SUITE 110 STREET ADDRESS 3211 32ND WAY STREET ADDRESS WEST PALM BEACH, FL 33409 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33407 TITLE ☐ Delete TITLE ☐ Change **X**Addition NAME GOLEMBIEWSKI, JUDITH A NAME CARMICHAEL, ANNE P. STREET ADDRESS 3520 WHITEHALL DR, #202 STREET ADDRESS 301 RIDGEVIEW ROAD CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 PALM BEACH, FL 33480 ☐ Delete TITLE **XX**Addition TITLE Change NAME WARWICK, CHARLES H III NAME HARRINGTON, RICHARD L. STREET ADDRESS STREET ADDRESS 677 ISLAND DRIVE 100 ROYAL PALM WAY, #1F CITY-ST-ZIP CITY-ST-ZIP PALM BEACH, FL PALM BEACH FL 33480 33480 TITLE XXChange ☐ Delete TITLE Addition MCLENDON, SAMUEL C. MCLENDON, SAMUEL C NAME NAME 300 S. OCEAN BOULEVARD STREET ADDRESS 300 S OCEAN BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM BEACH, FL 33480 JUPITER FL 33480 TITLE ☐ Delete TITLE Change **XX**Addition MATTHEWS, GEORGE G NAME NAME WHEELER, SANDRA S STREET ADDRESS PO O. BOX#14247 417 CHILIAN AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NORTH PALM BEACH, PALM BEACH FL 33480 33408 FL

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.