

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90142 046 ****61.25

DOCUMENT # 712167

1. Entity Name

THE ROYAL POINCIANA CHAPEL, INC.

Principal Place of Business

Mailing Address

60 COCOANUT ROW
 PALM BEACH FL 33480
 US

60 COCOANUT ROW
 PALM BEACH FL 33480
 US

000304JJ



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

71-2167601

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WHEELER, SANDRA'S
 60 COCOANUT ROW
 PALM BEACH FL 33480

Name

DR. RICHARD M. CROMIE

Street Address (P.O. Box Number is Not Acceptable)

60 COCOANUT ROW

City

PALM BEACH

FL

Zip Code
33480

8. 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

Richard M. Cromie

(Signature, typed or printed name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

DATE

APRIL 26, 2002

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Delete
NAME	PANNILL, WILLIAM G	
STREET ADDRESS	4 S LAKE TRAIL	
CITY-ST-ZIP	PALM BEACH FL 33480	
TITLE	VP	<input type="checkbox"/> Delete
NAME	RINKER, JOHN J	
STREET ADDRESS	380 COLUMBIA DRIVE STE 110	
CITY-ST-ZIP	WEST PALM BEACH FL 33409	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	GOLEMBIEWSKI, JUDITH A	
STREET ADDRESS	3520 WHITEHALL DR, #202	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WARWICK, CHARLES H III	
STREET ADDRESS	100 ROYAL PALM WAY, #1F	
CITY-ST-ZIP	PALM BEACH FL 33480	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MCLENDON, SAMUEL C	
STREET ADDRESS	300 S OCEAN BLVD	
CITY-ST-ZIP	JUPITER FL 33480	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MATTHEWS, GEORGE G.	
STREET ADDRESS	417 CHILIAN AVE	
CITY-ST-ZIP	PALM BEACH FL 33480	

TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GEORGE C. SLATON	
STREET ADDRESS	430 AUSTRALIAN AVENUE	
CITY-ST-ZIP	PALM BEACH, FL 33480	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JAMES C. ALBAN, JR.	
STREET ADDRESS	401 WORTH AVENUE	
CITY-ST-ZIP	PALM BEACH, FL 33480	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ANNE P. CARMICHAEL	
STREET ADDRESS	301 RIDGEVIEW ROAD	
CITY-ST-ZIP	PALM BEACH, FL 33480	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WILLIAM E. ELMORE, JR.	
STREET ADDRESS	340 S. OCEAN BLVD. APT. 306	
CITY-ST-ZIP	PALM BEACH, FL 33480	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RICHARD L. HARRINGTON	
STREET ADDRESS	677 ISLAND DRIVE	
CITY-ST-ZIP	PALM BEACH, FL 33480	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WILLIAM S. WATCHMAN, JR.	
STREET ADDRESS	269 MIRAFLORES DRIVE	
CITY-ST-ZIP	PALM BEACH, FL 33480	

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.

SIGNATURE:

Richard M. Cromie
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/02 (561) 655-4212

CR2E037 (9/01)