

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra E. Mortkam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 728891 (3)

1. Corporation Name  
ROYAL HIGHLANDS WEST PROPERTY OWNERS ASSOCIATION  
INC.

Principal Place of Business

9100 NAKOMA WAY  
BROOKSVILLE FL 34613

Mailing Address

9100 NAKOMA WAY  
BROOKSVILLE FL 34613



3. Date Incorporated or Qualified  
02/15/1974

3a. Date of Last Report  
04/19/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number  
59-2033314

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BOWIE, BRUCE T.  
9100 NAKOMA WAY  
WEEKI WACHEE FL 34613

81 Name

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

83

84 City

200001796602

04/26/96 01081-028

\*\*\*61.25

FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
PD	LAPISH, A. PHILIP	9100 NAKOMA WAY	BROOKSVILLE FL	<input type="checkbox"/>
VD	ALLEN, KENNETH C.	9100 NAKOMA WAY	BROOKSVILLE FL	<input type="checkbox"/>
VD	WEIK, JOHN H.	9100 NAKOMA WAY	BROOKSVILLE FL	<input type="checkbox"/>
VD	RAPP, EDWARD	9100 NAKOMA WAY	BROOKSVILLE FL	<input type="checkbox"/>
D	DUBIN, BERNICE	9100 NAKOMA WAY	BROOKSVILLE FL	<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
PD	Kenneth Allen	9100 Nakoma Way	Brooksville, FL 34613	<input checked="" type="checkbox"/>
VD	Lapish, A. Philip	9100 Nakoma Way	Brooksville, FL 34613	<input checked="" type="checkbox"/>
VD	Michalek, Edie	9100 Nakoma Way	Brooksville, FL 34613	<input checked="" type="checkbox"/>
VD	Whelan, Carol	9100 Nakoma Way	Brooksville, FL 34613	<input checked="" type="checkbox"/>
D	Bowie, Bruce T.	9100 Nakoma Way	Brooksville, FL 34613	<input type="checkbox"/>
				<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

*A. Philip Lapish*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A. Philip Lapish, President

Date

04-05-96

Daytime Phone #

CR2E037 (12/95)