

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR 23 PM 12:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 748198 (9)
1. Corporation Name
REGAL PALMS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address
3200 SPRINGDALE BLVD. 3200 SPRINGDALE BLVD.
OXFORD-115 OXFORD-115
PALM SPRINGS FL 33461 PALM SPRINGS FL 33461

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/25/1979 3a. Date of Last Report 03/10/1994
4. FEI Number 59-2163074 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 109.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARINO, NICHOLAS J.
3200 SPRINGDALE BLVD.
O-108
PALM SPRINGS FL 33461

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE DV
NAME BOSSO, PHILIP
STREET ADDRESS 3300 SPRINGDALE BLVD.
CITY-ST-ZIP PALM SPRINGS, FL 00000

TITLE D
NAME ALONSO, MANUEL
STREET ADDRESS 3300 SPRINGDALE BLVD
CITY-ST-ZIP PALM SPRINGS, FL 00000

TITLE D
NAME MAJEWSKI, CASIMIR
STREET ADDRESS 3500 SPRINGDALE BLVD.
CITY-ST-ZIP PALM SPRINGS, FL 00000

TITLE PD
NAME NICHOLAS, MARINO
STREET ADDRESS 3200 SPRINGDALE BLVD
CITY-ST-ZIP PALM SPRINGS, FL 00000

TITLE TD
NAME RODIS, ELIZABETH
STREET ADDRESS 3100 SPRINGDALE BLVD.
CITY-ST-ZIP PALM SPRINGS, FL 00000

TITLE S
NAME GARDNER, ROLLO
STREET ADDRESS 3200 SPRINGDALE BLVD.
CITY-ST-ZIP PALM SPRINGS, FL 00000

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME GALLUCCI, FRANCES
1.3 STREET ADDRESS 3300 SPRINGDALE BLVD. - M-305
1.4 CITY-ST-ZIP PALM SPRINGS, FL. 33461

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 110.07(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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Nicholas J. Marino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/95 (407) 433-0196
Date Daytime Phone #