2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 749621

1. Entity Name



FILED Apr 24, 2003 8:00 am Secretary of State

04-24-2003 90177 033 ****61.25

RUYAL S	INGAPORE LAKE TOWNHOUS	SE ASSOCIATION, IN	C.		,			
Principal Plac	ce of Business	Mailing Address						
P.O. BOX 170		P O BOX 22763						
MIAMI FL 330	 -	HIALEAH FL 33002						
					1 10 000 10 000 00 000		A (1 - 2 2 1 1 1 1 1 1 1 1	N 218(F148)
2 Principal 6	Place of Business	3. Mailing Address						
805,3		8053 NW	155 S	-			811 81811 81811 B18	FI 81811 FB 81
Suite, Apt.		Suite, Apt. #, etc.	<u>100 a</u>	/		IFOX LIEDE IE MAXIN	0.000	
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City & Star		City & State			4. FEI Number 59-	2066582	Ar	plied For
<u>Mam</u>	i HAKES, FU	MIAMI LA					No	ot Applicable
Zip	Country	Zip	Country	n	5. Certificate of Stat	tus Desired 📋	\$8.75 Add	
330	6 U-3.A.	330/6	U.S.	+1			Fee Require	d
	6. Name and Address of Current	Hegistered Agent	a- ∴ Name	e~/-/-	St. Sec. of Superior Sec.	ess of New Registered		
LIAM DA	U DU M			76A			<u>Genei</u>	ot Co.
HAM, RALPH M YEAR ROUND MANAGEMENT CO.				t Address (F 253	P.O. Box Number is No	t Acceptable)		
	INDEE TER		_ <u>~ ~ ·</u>	/ () ()	10 W 13	<u> </u>		
	AKES FL 33016						1	
MW 400 G	112012 00010		City	VIAN	ni LAKE	ج Fl	Zip Cod	0/6
8. The above	e named entity submits this statement fo	r the purpose of changing its	registered office					
the obliga	itions of registered agent.							
	(1011/W2				a	4/09/03		
SIGNATURE	Olover	Los a Fill Motor				41 9 7/87		
0	Signature, typed or printed harne of registered agent	and title if applicable. (NOTE	E: Registered Agent sig	gnature required	when reinstating)	DAIL		
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É.	FILE NOW: PEE IS \$61.25	9. Election Can Trust Fund C	npaign Financin Contribution.	g 🗆	\$5.00 May Be Added to Fees	Make Chec Florida Depa	-	
10.	FILE NOW: PEE IS \$61.25	Trust Fund C			Added to Fees	Florida Depa	rtment of S	State
•		Trust Fund C	Contribution.		Added to Fees ADDITIONS/CHANGES	Florida Depa	rtment of S	State
10.	OFFICERS AND DIS	Trust Fund C	Contribution.		Added to Fees ADDITIONS/CHANGES	Florida Depa	rtment of S	State
10. TITLE NAME STREET ADDRESS	OFFICERS AND DIF YD SEILER, CONNIE 7300 COLDSTREAM	Trust Fund C	11. TITLE NAME STREET ADDRES	P Jupy 5 7310	Added to Fees ADDITIONS/CHANGES Lipping Coldstein	Florida Depa	rtment of S	State
10. TITLE NAME	OFFICERS AND DIF YD SEILER, CONNIE 7300 COLDSTREAM HIALEAH FL 33015	Trust Fund C	11. TITLE NAME		Added to Fees ADDITIONS/CHANGES Lipping Coldstein	Florida Depa	IRECTORS IN Change	10 Addition
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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 of 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 the empowered.

SIGNATURE: