

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N000000000084

FILED  
Apr 20, 2012  
Secretary of State

**Entity Name:** ROYAL ST. AUGUSTINE PARCEL OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

79 MASTERS DRIVE  
SAINT AUGUSTINE, FL 32084 US

**New Principal Place of Business:**

**Current Mailing Address:**

79 MASTERS DRIVE  
SAINT AUGUSTINE, FL 32084 US

**New Mailing Address:**

**FEI Number:** 59-3631443

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

THE NEIGHBORHOOD MANAGERS INC.  
79 MASTERS DRIVE  
SAINT AUGUSTINE, FL 32084 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VD  
Name: JACOBS, RICHARD  
Address: 1760 KESWICK RD  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D  
Name: MERCHANT, JAMES  
Address: 909 OXFORD DR  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D  
Name: REINHART, PEG  
Address: 1437 STOCKBRIDGE LANE  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: SD  
Name: MCLAUGHLIN, LORRAINE  
Address: 79 MASTERS DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: PD  
Name: MILONE, DOMINICK  
Address: 1201 ELLINGTON CT  
City-St-Zip: ST AUGUSTINE, FL 32084

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** DOMINICK MILONE

PD

04/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date