

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# N02000007010

Entity Name: ROYAL PALMS OF ST. LUCIE, INC.

Current Principal Place of Business:

5792 NW COOSA DR
PORT SAINT LUCIE, FL 34986

New Principal Place of Business:

1462 SW APACHE AVE
PORT SAINT LUCIE, FL 34953

Current Mailing Address:

POB 3353
FORT PIERCE, FL 34948

New Mailing Address:

POBOX 3353
FORT PIERCE, FL 34948

FEI Number: 02-0643004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AYCOCK, AIMEE
5792 NW COOSA DR
PORT SAINT LUCIE, FL 34986 US

Name and Address of New Registered Agent:

WEDEBROOK, JENNIFER
1462 SW APACHE AVE
PORT SAINT LUCIE, FL 34953 US

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: JENNIFER WEDEBROOK

04/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AYCOCK, AIMEE
Address: 5792 NW COOSA DR
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: VP () Delete
Name: PRIDE, SARAH
Address: 9615 KNOLLWOOD LANE
City-St-Zip: FORT PIERCE, FL 34951

Title: T () Delete
Name: HOGAN, KATIE
Address: 33 HARBOR ISLE DR W #305
City-St-Zip: FORT PIERCE, FL 34949

Title: S () Delete
Name: TAUSCH, JANIE
Address: 133 NW BYRON ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: WEDEBROOK, JENNIFER
Address: 1462 SW APACHE AVE
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: P (X) Change () Addition
Name: SPRINGSTEEN, BECKY
Address: 1547 C PHEASNT WALK
City-St-Zip: FORT PIERCE, FL 34950

Title: VP (X) Change () Addition
Name: DAVIS, EMILY
Address: 1204 KINGSWOOD LANE
City-St-Zip: FORT PIERCE, FL 34982

Title: S (X) Change () Addition
Name: TAUSCH, JANIE
Address: 631 NW KILDARE ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JENNIFER WEDEBROOK

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04/13/2009

Electronic Signature of Signing Officer or Director

Date