


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

FILED
Jul 07, 2003 8:00 am
Secretary of State

06-13-2003 90059 013 ****70.00

DOCUMENT # N02000007010					
1. Entity Name ROYAL PALMS OF ST. LUCIE, INC.					
Principal Place of Business 717 GEORGIA AVE. FT. PIERCE FL 34950		Mailing Address 717 GEORGIA AVE. FT. PIERCE FL 34950		<p style="text-align: right; font-size: 24pt;">44005411</p> <div style="background-color: black; width: 200px; height: 20px; margin: 5px auto;"></div>	
2. Principal Place of Business 2810 D STONEWAY LN		3. Mailing Address 2810 D STONEWAY LN			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<input checked="" type="checkbox"/> CHECK HERE IF MAKING CHANGES	
City & State FT PIERCE FL		City & State FT PIERCE FL			
Zip 34982	Country USA	Zip 34982	Country USA	4. FEI Number 02-0643004	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent KOBLEGARD, KRISTEN N 717 GEORGIA AVE. FT. PIERCE FL 34950			7. Name and Address of New Registered Agent Name KRISTEN KOBLEGARD CHEYNE Street Address (P.O. Box Number is Not Acceptable) 2810 D STONEWAY LANE City FT PIERCE FL Zip Code 34982		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>Kristen Koblegard Cheyne</i>		Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE 6-10-03	
FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT D SARA LIND 715 GEORGIA AVE FT PIERCE FL 34950	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT BEULI SPRINGSTEEN D 711 BEACH COVE FT PIERCE FL 34950	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	KRISTEN CHEYNE TREASURER D 2810 D STONEWAY LANE FT PIERCE FL 34982	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NIKKI BLACKWELL SECRETARY 317 ST. LOUIS LANE FT PIERCE FL 34994	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 or 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 like empowered.					
SIGNATURE: <i>Kristen Koblegard Cheyne</i>		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE 6-10-03 PHONE 7722311703	

CR2E037 (10/02)