

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003645

FILED
May 29, 2007
Secretary of State

Entity Name: ROYAL GRAND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1200 PONCE DE LEON BLVD
MIAMI, FL 33134

New Principal Place of Business:

Current Mailing Address:

1200 PONCE DE LEON BLVD
MIAMI, FL 33134

New Mailing Address:

FEI Number: 20-4770427 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BEC, RICHARD ESQ
ARAN CORREA GUARCH & SHAPIRO, P.A.
255 UNIVERSITY DRIVE
MIAMI, FL 33134 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: DP () Delete
Name: BODE, ODALYS
Address: 1200 PONCE DE LEON BLVD
City-St-Zip: MIAMI, FL 33134

Title: DV () Delete
Name: DAVIDSON, COLLEEN
Address: 1200 PONCE DE LEON BLVD
City-St-Zip: MIAMI, FL 33134

Title: DS () Delete
Name: PALACIOS, GERARDO
Address: 1200 PONCE DE LEON BLVD
City-St-Zip: MIAMI, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ODALYS BODE

DP

05/29/2007

Electronic Signature of Signing Officer or Director

Date