

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2008
Secretary of State**

DOCUMENT# N06000008742

Entity Name: ROYAL FLORIDIAN SOUTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

53 S. ATLANTIC AVE.
ORMOND BEACH, FL 32176

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6685
HILTON HEAD, SC 29938 US

New Mailing Address:

FEI Number: 20-5053369 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JONES, BRIAN M
300 S. ORANGE AVE.
STE. 1000
ORLANDO, FL 32801 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: DV () Delete
Name: TAYLOR, KENNETH E.
Address: 53 S. ATLANTIC AVE.
City-St-Zip: ORMOND BEACH, FL 32176

Title: DP () Delete
Name: WILLIAMS, THOMAS P.
Address: 53 S. ATLANTIC AVE.
City-St-Zip: ORMOND BEACH, FL 32176

Title: DTS () Delete
Name: MATTHEWS, BASIL W.
Address: 53 S. ATLANTIC AVE.
City-St-Zip: ORMOND BEACH, FL 32176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change () Addition
Name: TAYLOR, KENNETH E.
Address: 53 S. ATLANTIC AVE.
City-St-Zip: ORMOND BEACH, FL 32176

Title: DP (X) Change () Addition
Name: WILLIAMS, THOMAS P.
Address: 35 DEALLYON RD
City-St-Zip: HILTON HEAD, SC 29928

Title: DTS (X) Change () Addition
Name: MATTHEWS, BASIL W.
Address: 59 POPE AVE
City-St-Zip: HILTON HEAD, SC 29928

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: BASIL W MATTHEWS

Electronic Signature of Signing Officer or Director

DTS

04/30/2008

Date