


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 22, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N29208</b> 1. Entity Name ROYAL WOOD SINGLE FAMILY HOMES ASSOCIATION, INC.	
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Principal Place of Business 4300 ROYAL WOOD BLVD NAPLES, FL 34112 US	Mailing Address 4300 ROYAL WOOD BLVD NAPLES, FL 34112 US
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**DO NOT WRITE IN THIS SPACE**

01162007 No Chg-NP		CR2E037 (4/06)
4. FEI Number 65-0083827	Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent  POPPENS, ARNOLD D 6046 WESTBOURGH DRIVE NAPLES, FL 34112
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**Filing Fee is \$61.25**  
**Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SPINDLER, HARRY 4510 ASHTON COURT NAPLES, FL 34112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD POPPENS, ARNOLD 6046 WESTBOURTH DRIVE NAPLES, FL 34112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D KELSON, CHARLES 3821 ROYAL WOOD BLVD NAPLES, FL 34112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANDERS, PAUL 3445 ROYAL WOOD BLVD NAPLES, FL 34112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D3 POPPENS, ARNOLD 6046 WESTBOURGH DR NAPLES, FL 34112
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD OPPERMAN, DANIEL 4666 ASHTON CT NAPLES, FL 34112

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 01/23/07-80025-014 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Daniel W Opperman 1/16/7 239-734-0687  
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR Date Daytime Phone #

DANIEL W OPPERMAN