

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002373

FILED  
Jul 20, 2005  
Secretary of State

Entity Name: ROYAL FLORIDIAN RESORT ASSOCIATION, INC.

**Current Principal Place of Business:**

51 S. ATLANTIC AVE  
ORMOND BEACH, FL 32176

**New Principal Place of Business:**

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

**Current Mailing Address:**

51 S. ATLANTIC AVE  
ORMOND BEACH, FL 32176

**New Mailing Address:**

FEI Number: 59-3485067      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:**

JONES, BRIAN M  
20 N. 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: DP ( ) Delete  
Name: COOPER, THOMAS DR.  
Address: 826 GLENDOVER COVE  
City-St-Zip: LEXINGTON, KY 40502

Title: DVP ( ) Delete  
Name: RHEA, ALICE J  
Address: 243 BRENTWOOD DRIVE  
City-St-Zip: LEESBURG, FL 34748

Title: DS ( ) Delete  
Name: MEADOWS, RICHARD W  
Address: 56 OAKVIEW CIR  
City-St-Zip: ORMOND BEACH, FL 321762842

Title: DT ( ) Delete  
Name: WILLIAMS, THOMAS P  
Address: 35 DEALLYON ROAD  
City-St-Zip: HILTON HEAD ISLAND, SC 29928

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: DS (X) Change ( ) Addition  
Name: RHEA, ALICE J  
Address: 243 BRENTWOOD DRIVE  
City-St-Zip: LEESBURG, FL 34748

Title: DVP (X) Change ( ) Addition  
Name: BROWN, STEVE  
Address: 101 WEST MAIN STREET STE 200  
City-St-Zip: LAKELAND, FL 33815

Title: DAT (X) Change ( ) Addition  
Name: WILLIAMS, THOMAS P  
Address: 35 DEALLYON ROAD  
City-St-Zip: HILTON HEAD ISLAND, SC 29928

Title: DT ( ) Change (X) Addition  
Name: LAWLER, JAMES  
Address: 111106 S. W. 73RD CIRCLE  
City-St-Zip: OCALA, FL 34476

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FRANK AMENDOLIA

CTR

07/20/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date