

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006765

FILED  
Feb 25, 2011  
Secretary of State

**Entity Name:** ROYAL PALMS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

727 MAJESTY DRIVE  
DAVENPORT, FL 33837

**New Principal Place of Business:**

**Current Mailing Address:**

347 MAJESTY DR.  
DAVENPORT, FL 33837

**New Mailing Address:**

FEI Number: 59-2830097

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MURPHY, CATHARINE A MRS.  
727 MAJESTY DRIVE  
DAVENPORT, FL 33837 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: SEC.  
Name: MURPHY, CATHARINE A  
Address: 347 MAJESTY DRIVE  
City-St-Zip: DAVENPORT, FL 33837

Title: VPD  
Name: WRIGHT, DAVID  
Address: 347 MAJESTY DRIVE  
City-St-Zip: DAVENPORT, FL 33837

Title: TRES  
Name: SLATER, DENIS  
Address: 347 MAJESTY DRIVE  
City-St-Zip: DAVENPORT, FL 33837

Title: PRES  
Name: HENRY, PLOUFFE  
Address: 347 MAJESTY DRIVE  
City-St-Zip: DAVENPORT, FL 33837

Title: MBR  
Name: MCSORLEY, TRINA  
Address: 347 MAJESTY DRIVE  
City-St-Zip: DAVENPORT, FL 33837

Title: MBR  
Name: BRODERICK, MARTHA  
Address: 347 MAJESTY DRIVE  
City-St-Zip: DAVENPORT, FL 33837

I hereby 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 all other like empowered.

SIGNATURE: CATHARINE A. MURPHY

SEC

02/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date