

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21700

FILED
Apr 17, 2009
Secretary of State

Entity Name: ROYAL PALM COVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

21045 COMMERCIAL TR
BOCA RATON, FL 33486 US

New Principal Place of Business:

Current Mailing Address:

21045 COMMERCIAL TR
BOCA RATON, FL 33486 US

New Mailing Address:

FEI Number: 65-0107336

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAM K. ISAACSON,
C/O LANG MANAGEMENT COMPANY, INC.
21045 COMMERCIAL TRAIL
BOCA RATON, FL 334861006 US

Name and Address of New Registered Agent:

ISAACSON, WILLIAM K
C/O LANG MANAGEMENT COMPANY, INC.
21045 COMMERCIAL TRAIL
BOCA RATON, FL 334861006 US

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: WILLIAM K. ISAACSON

04/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: ACKERMAN, DONNA
Address: 17038 ROYAL COVE WAY
City-St-Zip: BOCA RATON, FL 33496

Title: DS () Delete
Name: RAPAPORT, STEPHEN
Address: 17189 ROYAL COVE WAY
City-St-Zip: BOCA RATON, FL 33496

Title: P () Delete
Name: HERSON, MILTON
Address: 17173 ROYAL COVE WAY
City-St-Zip: BOCA RATON, FL 33496

Title: D () Delete
Name: MAHONEY, GERALD
Address: 17101 ROYAL COVE WAY
City-St-Zip: BOCA RATON, FL

Title: D () Delete
Name: ROCHELLE, FRANK
Address: 17157 ROYAL COVE WAY
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: LEVINSON, ALAN
Address: 17133 ROYAL COVE WAY
City-St-Zip: BOCA RATON, FL 33496

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

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

Title: T (X) Change () Addition
Name: SHAPIRO, GEORGE
Address: 17117 ROYAL COVE WAY
City-St-Zip: BOCA RATON, FL 33496

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: MILTON HERSON

P

04/17/2009

Electronic Signature of Signing Officer or Director

Date