2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005538

FILED Apr 15, 2009 Secretary of State

Entity Name: ROYAL PALM SQUARE CONDOMINIUM ASSOCIATION, INC.

US

Current Principal Place of Business: New Principal Place of Business:

8880 ROYAL PALM BLVD CORAL SPRINGS, FL 33065

Current Mailing Address: New Mailing Address:

13680 NW 5TH STREET 255 ALHAMBRA CIRCLE SUITE 325 SUITE 100

CORAL GABLES, FL 33134 US SUNRISE, FL 33325 US

FEI Number: 26-2763785 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MACNAIR, CHRISTOPHER J MACNAIR, CHRISTOPHER J 13680 NW 5TH STREET 255 ALHAMBRA CIRCLE SUITE 325 SUITE 100 CORAL GABLES, FL 33134 US SUNRISE, FL 33325 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: 04/15/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete MAC NAIR, CHRISTOPHER J MAC NAIR, CHRISTOPHER J Name: Name: 255 ALHAMBRA CIRCLE, SUITE 325 Address: 13680 NW 5TH STREET, SUITE 100 Address: City-St-Zip: CORAL GABLES, FL 33134 US City-St-Zip: SUNRISE, FL 33325 US

Title: Title:

() Delete (X) Change () Addition Name: FERTIG, JAY Name: FERTIG, JAY

Address: 255 ALHAMBRA CIRCLE, SUITE 325 Address:

13680 NW 5TH STREET, SUITE 100 City-St-Zip: CORAL GABLES, FL 33134 US City-St-Zip: SUNRISE, FL 33325 US

Title: MGR () Delete Title: MGR (X) Change () Addition SOFFER, MARSHA Name: SOFFER, MARSHA Name:

255 ALHAMBRA CIRCLE #325 13680 NW 5TH STREET, SUITE 100 Address: Address:

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: SUNRISE, FL 33325 US

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: CHRISTOPHER J. MACNAIR RΑ 04/15/2009