

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 736618

**Entity Name:** ROYAL PALM HARBOR ASSOCIATION**Current Principal Place of Business:**2831 RINGLING BLVD  
BLDG B, STE 203D  
SARASOTA, FL 34237**Current Mailing Address:**PO BOX 51362  
SARASOTA, FL 34232 US**FEI Number:** 59-1712139**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TRIMPE, JULIE  
2831 RINGLING BLVD  
BLDG B, STE 203D  
SARASOTA, FL 34237 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:** JULIE TRIMPE**04/28/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            BRINKMEYER, JOE  
Address        1235 SOUTHPORT DR.  
City-State-Zip: SARASOTA FL 34242

Title            DIRECTOR  
Name            FORCE, MIKE  
Address        1267 SOUTHPORT DR.  
City-State-Zip: SARASOTA FL 34242

Title            DIRECTOR  
Name            TAFFET, JILL  
Address        1240 NORTHPORT DR  
City-State-Zip: SARASOTA FL 34242

Title            DIRECTOR  
Name            HAMLIN, TERRY  
Address        1259 SOUTHPORT DR  
City-State-Zip: SARASOTA FL 34242

Title            DIRECTOR, VP  
Name            JOSEPH, TAMARA  
Address        1283 SOUTHPORT DR  
City-State-Zip: SARASOTA FL 34242

Title            DIRECTOR, SECRETARY  
Name            WALKER, JOHN  
Address        1251 SOUTHPORT  
City-State-Zip: SARASOTA FL 34242

Title            DIRECTOR, TREASURER  
Name            FRANEY, HENRY  
Address        1216 NORTHPORT  
City-State-Zip: SARASOTA FL 34242

Title            DIRECTOR  
Name            ANDERSON, GREG  
Address        1256 NORTHPORT  
City-State-Zip: SARASOTA FL 34242

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*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:** JOE BRINKMEYER**PRESIDENT****04/28/2023**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	WONDERLIC, RICHARD
Address	1201 SOUTHPORT
City-State-Zip:	SARASOTA FL 34242