

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 756146

**Entity Name:** ROYAL PARK GARDENS CONDOMINIUM III ASSOCIATION, INC.

**FILED**  
**Apr 19, 2021**  
**Secretary of State**  
**2586519285CC**

**Current Principal Place of Business:**

6720 ROYAL PALM BLVD  
MARGATE, FL 33063

**Current Mailing Address:**

6720 ROYAL PALM BLVD  
MARGATE, FL 33063

**FEI Number: 59-2072363**

**Certificate of Status Desired: No**

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

STEVEN, VALANCY  
311 S.E. 13TH STREET  
FT.LAUDERDALE, FL 33316 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: STEVEN VALANCY**

**04/19/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           SANT'ELIA, ANTHONY  
Address        6890 ROYAL PALM BLVD #108  
City-State-Zip: MARGATE FL 33063

Title           SECRETARY  
Name           ITALICO, DOLORES  
Address        6850 ROYAL PALM BLVD #302  
City-State-Zip: MARGATE FL 33063

Title           VP  
Name           SANDLER, HAROLD  
Address        6870 ROYAL PALM BLVD 208  
City-State-Zip: MARGATE FL 33063

Title           DIRECTOR  
Name           ROECKELEIN, LOIS  
Address        6890 ROYAL PALM BLVD. 101  
City-State-Zip: MARGATE FL 33063

Title           PRESIDENT  
Name           DAVI, ROSE ANN  
Address        6850 ROYAL PALM BLVD. 311  
City-State-Zip: MARGATE FL 33063

Title           DIRECTOR  
Name           MICHAELS, MAUREEN  
Address        6870 ROYAL PALM BLVD. 215  
City-State-Zip: MARGATE FL 33063

Title           VP  
Name           GOOGE, WILLIAM  
Address        6800 ROYAL PALM BLVD. 112  
City-State-Zip: MARGATE FL 33063

Title           DIRECTOR  
Name           SCHEFFER, LYLE  
Address        6870 ROYAL PALM BLVD.  
                  M214  
City-State-Zip: MARGATE FL 33063

*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: ROSEANN DAVI**

**PRESIDENT**

**04/19/2021**

Electronic Signature of Signing Officer/Director Detail

Date