

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 756146

**FILED  
Mar 20, 2013  
Secretary of State  
CC3166347597**

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

**Current Principal Place of Business:**

1323 LYONS RD.  
COCONUT CREEK, 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:**

ALLIANCE CAS,LLC  
1000 E. HALLANDALE BEACH BLVD.  
HALLANDALE BEACH, FL 33009 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:** SCOTT JAFFEE

03/20/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SD  
Name LUPO, MARIE  
Address 6890 ROYAL PALM BLVD #306  
City-State-Zip: MARGATE FL 33063

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

Title TD  
Name EMDE, RON  
Address 6800 ROYAL PALM BLVD #304  
City-State-Zip: MARGATE FL 33063

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

Title DIRECTOR  
Name CAPOBIANCO, RONALD  
Address 6800 ROYAL PALM BLVD. 205  
City-State-Zip: MARGATE FL 33063

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

Title DIRECTOR  
Name ALVINO, ROBERT  
Address 6850 ROYAL PALM BLVD. 212  
City-State-Zip: MARGATE FL 33063

Title DIRECTOR  
Name CENNAME, FRANK  
Address 6890 ROYAL PALM BLVD. 204  
City-State-Zip: MARGATE FL 33063

**Continues on page 2**

*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:** HAROLD SANDLER

PRES.

03/20/2013

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           LEONE, JOHN  
Address        6870 ROYAL PALM BLVD. 204  
City-State-Zip: MARGATE FL 33063