Entity Name: CASA ROYALE HOMEOWNERS ASSOCIATION, INC.

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## **Current Principal Place of Business:**

1818 S. AUSTRALIAN AVE., SUITE 400 WEST PALM BEACH, FL 33409

DOCUMENT# N0000006031

## **Current Mailing Address:**

C/O ASSOCIATED PROPERTY MANAGEMENT 8135 LAKE WORTH ROAD SUITE B LAKE WORTH, FL 33467 US

## FEI Number: 54-2154425

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

STOLOFF & MANOFF, P.A C/O SCOTT STOLOFF 1818 S. AUSTRALIAN AVE., SUITE 400 WEST PALM BEACH, FL 33409 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 STOLOFF, ESQ		04/29/2019
	Electronic Signature of Registered Agent		Date
Officer/Director Detail :			
Title	PRESIDENT	Title	VP
Name	LEWIS, VICTORIA	Name	SAMWARU, OMADAT
Address	C/O ASSOCIATED PROPERTY MANAGEMENT 8135 LAKE WORTH ROAD SUITE B	Address	C/O ASSOCIATED PROPERTY MANAGEMENT 8135 LAKE WORTH ROAD SUITE B
City-State-Zip:	LAKE WORTH FL 33467	City-State-Zip:	LAKE WORTH FL 33467
Title	SECRETARY, TREASURER		
Name	JOHNSON, CARLENE		
Address	C/O ASSOCIATED PROPERTY MANAGEMENT 8135 LAKE WORTH ROAD SUITE B		
City-State-Zip:	LAKE WORTH FL 33467		

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: VICTORIA LEWIS

PRESIDENT

04/29/2019

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date