

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

DOCUMENT# N22522

**Entity Name:** MOUNT ROYAL ESTATES HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Feb 11, 2023**  
**Secretary of State**  
**4003360332CC**

**Current Principal Place of Business:**

100 WILLIAM BARTRAM DRIVE #34  
CRESCENT CITY, FL 32112

**Current Mailing Address:**

100 WILLIAM BARTRAM DRIVE #34  
CRESCENT CITY, FL 32112 US

**FEI Number:** 59-2960995

**Certificate of Status Desired:** No

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

MADDEN, JEANNE E  
100 WILLIAM BARTRAM DRIVE #34  
CRESCENT CITY, FL 32112 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:** JEANNE E MADDEN

02/11/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRESIDENT / BOARD MEMBER

Name DRAGO, SUSAN

Address 100 WILLIAM BARTRAM DRIVE #34

City-State-Zip: CRESCENT CITY FL 32112

Title SECRETARY / BOARD MEMBER

Name MONROE, PAMELA

Address 100 WILLIAM BARTRAM DRIVE #34

City-State-Zip: CRESCENT CITY FL 32112

Title VICE PRESIDENT / BOARD MEMBER

Name KLEINSMITH, JANET

Address 100 WILLIAM BARTRAM DRIVE #34

City-State-Zip: CRESCENT CITY FL 32112

Title BOARD MEMBER

Name BREWER, AGNES

Address 100 WILLIAM BARTRAM DRIVE #34

City-State-Zip: CRESCENT CITY FL 32112

Title TREASURER / BOARD MEMBER

Name MADDEN, JEANNE E

Address 100 WILLIAM BARTRAM DRIVE #34

City-State-Zip: CRESCENT CITY FL 32112

*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:** JEANNE E MADDEN

**TREASURER**

02/11/2023

Electronic Signature of Signing Officer/Director Detail

Date