

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22522

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

02/01/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT / BOARD MEMBER
Name MCCOLLUM, JAMES
Address 100 WILLIAM BARTRAM DRIVE #34
City-State-Zip: CRESCENT CITY FL 32112

Title VP / BOARD MEMBER
Name DRAGO, SUSAN
Address 100 WILLIAM BARTRAM DRIVE #34
City-State-Zip: CRESCENT CITY FL 32112

Title TREASURER / BOARD MEMBER
Name SUSAN , CHANDLEE
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 BOARD MEMBER
Name SHOEMAKER, CRAIG
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: SUSAN M CHANDLEE

TREASURER

02/01/2022

Electronic Signature of Signing Officer/Director Detail

Date