

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N32666

**Entity Name:** ROYAL PALM FOREST HOMEOWNERS ASSOCIATION, INC.**FILED**  
**Mar 25, 2018**  
**Secretary of State**  
**CC2335179023****Current Principal Place of Business:**2295 CORPORATE BLVD NW  
SUITE 138  
BOCA RATON, FL 33431**Current Mailing Address:**2295 CORPORATE BLVD NW  
SUITE 138  
BOCA RATON, FL 33431 US**FEI Number:** 65-0130796**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HAAG, DAVID  
2295 CORPORATE BLVD NW  
SUITE 138  
BOCA RATON, FL 33431 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	SD
Name	GLINES, MARSHA
Address	2295 CORPORATE BLVD NW SUITE 138
City-State-Zip:	BOCA RATON FL 33431

Title	D
Name	SELVAGGIO, MARIALENA
Address	2295 CORPORATE BLVD NW SUITE 138
City-State-Zip:	BOCA RATON FL 33431

Title	D
Name	SOSIN, PETER
Address	2295 CORPORATE BLVD NW SUITE 138
City-State-Zip:	BOCA RATON FL 33431

Title	VPD
Name	SUMISLASKI, JIM
Address	2295 CORPORATE BLVD NW SUITE 138
City-State-Zip:	BOCA RATON FL 33431

Title	PTD
Name	GANNON, MARY ELLEN
Address	2295 CORPORATE BLVD NW SUITE 138
City-State-Zip:	BOCA RATON FL 33431

*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:** MARY ELLEN GANNON**PRESIDENT****03/25/2018**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date