

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707644

FILED
Apr 23, 2007
Secretary of State

Entity Name: THE PALM ROYAL APARTMENTS, INC.

Current Principal Place of Business:

36 SE 13TH ST.
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

36 SE 13TH ST
BOCA RATON, FL 33432 US

New Mailing Address:

FEI Number: 59-1225627

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, EMILY
36 SE 13TH ST
10 SE 13TH ST APT D1
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D,VP () Delete
Name: ROBINSON, EMILY
Address: 10 SE 13TH ST D-1
City-St-Zip: BOCA RATON, FL 33432

Title: D,T () Delete
Name: LABONTE, WILLIAM
Address: 20 SE 13TH ST. A-4
City-St-Zip: BOCA RATON, FL 33432

Title: D,P () Delete
Name: GREFF, FRANCINE
Address: 45 SOUTHEAST 13TH STREET B-1
City-St-Zip: BOCA RATON, FL 33432

Title: D,S () Delete
Name: CECIL, LELAND
Address: 40 SOUTHEAST 13TH STREET B-1
City-St-Zip: BOCA RATON, FL 33432

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D,S (X) Change () Addition
Name: BEGLEY, JOAN
Address: 20 S.E. 13TH STREET A6
City-St-Zip: BOCA RATON, FL 33432

Title: D () Change (X) Addition
Name: BARLOW, DAVE
Address: 10 S.E. 13TH STREET A1
City-St-Zip: BOCA RATON, FL 33432

Title: D () Change (X) Addition
Name: KNOPH, BERNARD
Address: 30 S.E. 13TH STREET A4
City-St-Zip: BOCA RATON, FL 33432

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FRANCINE GREFF

PRES

04/23/2007

Electronic Signature of Signing Officer or Director

Date