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FILED
Jun 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 715026

1. Corporation Name

ROYAL BAHAMIAN ASSOCIATION, INC.

Principal Place of Business C/O MIAMI MANAGEMENT, INC. 14275 SW 142 Avenue Miami FL 33186	Mailing Address C/O Miami Management, Inc. 14275 SW 142 Avenue Miami FL 33186
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3. Date Incorporated or Qualified
7/29/1968

4. FEI Number
59-1224627

Applied For
Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?
☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRENDA WILNER
1075 NE MIAMI GARDENS DR
NO. MIAMI, FLA #703W
33179

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes.

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

5/13/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	☐ DELETE
NAME	Wilner, Brenda	
STREET ADDRESS	1075 NE Miami Gardens Dr. # 703W	
CITY-ST-ZIP	N. Miami Bch. FL 33179	
TITLE	VP	☐ DELETE
NAME	Feinsmith, Esther	
STREET ADDRESS	1175 NE Miami Gardens Dr. # 209E	
CITY-ST-ZIP	N. Miami Beach FL 33179	
TITLE	SD	☐ DELETE
NAME	Arnold, Mikki	
STREET ADDRESS	1175 NE Miami Gardens Dr. # 707E	
CITY-ST-ZIP	N. Miami Beach FL 33179	
TITLE	TD	☐ DELETE
NAME	Goldman, Shiela	
STREET ADDRESS	1075 NE Miami Gardens Dr. # 301W	
CITY-ST-ZIP	N. Miami Beach FL 33179	
TITLE	D	☐ DELETE
NAME	Frumovitz, Ruth	
STREET ADDRESS	1175 NE Miami Gardens Dr. # 610E	
CITY-ST-ZIP	N. Miami Beach FL 33179	
TITLE	D	☐ DELETE
NAME	Cutler, Betty	
STREET ADDRESS	1175 NE Miami Gardens Dr. # 102E	
CITY-ST-ZIP	N. Miami Beach FL 33179	

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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***\$61.25

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *BRENDA WILNER*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/98
Date

800-755-9588
Daytime Phone # 526

CF2E037 (10/97)