

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716075

FILED
Jan 10, 2007
Secretary of State

Entity Name: ONE ROYAL PALM WAY ASSOCIATION, INC.

Current Principal Place of Business:

100 ROYAL PALM WAY
PALM BCH, FL 33480

New Principal Place of Business:

Current Mailing Address:

100 ROYAL PALM WAY
PALM BCH, FL 33480

New Mailing Address:

FEI Number: 59-1235771

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUMIA, SANTO
100 ROYAL PALM WAY
PALM BCH, FL 33480 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: VDT () Delete
Name: LEMBO, GREGORY
Address: 100 ROYAL PALM WAY (A4)
City-St-Zip: PALM BEACH, FL

Title: PD () Delete
Name: LA VOY, KENNETH,
Address: 100 ROYAL PALM WAY (C2)
City-St-Zip: PALM BEACH, FL

Title: SD () Delete
Name: CRAWFORD, KAY
Address: 100 ROYAL PALM WAY (G5)
City-St-Zip: PALM BCH, FL 00000,

Title: VD () Delete
Name: SWAN, THOMAS
Address: 100 ROYAL PALM WAY (PHD)
City-St-Zip: PALM BEACH, FL

Title: DAS () Delete
Name: LIST, THOMAS
Address: 100 ROYAL PALM WAY (F2)
City-St-Zip: PALM BEACH, FL 33480

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

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

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: THOMAS LIST

A/SE

01/10/2007

Electronic Signature of Signing Officer or Director

Date