2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#716136

FILED Feb 12, 2009 Secretary of State

Entity Name: ROYAL STEWART ARMS, INC., NO. 2, A CONDOMINIUM

Current Principal Place of Business: New Principal Place of Business: 1 ROYAL STEWART PKWY DUNEDIN, FL 34698 **Current Mailing Address: New Mailing Address:** 1 ROYAL STEWART PKWY DUNEDIN, FL 34698 FEI Number: 59-2007966 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILSON, SHARON 1 ROYAL STEWART PKWY DUNEDIN, FL 34698 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete SNYDER, JUNE MCGILLICUDDY, JOSEPHINE Name: Name: 5 GATESHEAD DR. #104 Address: 5 GATESHEAD DR. #101 Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698 Title: () Delete Title: (X) Change () Addition MCGILLICUDDY, JOSPHINE Name: STIERS, CHARLES Name: Address: 5 GATESHEAD DR 101 C Address: 5 GATESHEAD DR #302 City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698 Title: () Delete Title: () Change () Addition PRECHTL, MARGARET Name: Name: 5 GATESHEAD DR #319 Address: Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ARNOLD, RUDOLPH Name: 5 GATESHEAD DR #207 Address: Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: Title: () Delete Title: (X) Change () Addition STEIRS, CHARLES WASHER, YVONNE Name: Name: 5 GATESHEAD DR. #302 5 GATESHEAD DR. #108 Address: Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698 Title: (X) Delete Title: () Change () Addition WASHER, YVONNE Name: Name: Address: 5 GATESHEAD DR #108 Address: DUNEDIN, FL 34698 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: YVONNE WASHER S 02/12/2009