2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT (AR) DOCUMENT # 719782 1. Entity Name

ROYALE GREEN LAGOON HOMEOWNERS' ASSOCIATION NO.2. INC.



FILED Jun 07, 2007 8:00 am **Secretary of State**

06-07-2007 90003 004 ****61.25



Principal Place of Business Mailing Address 11540 SW 142 PL C/O OLYMPIA FUERTH 11540 SW 142 PLACE MIAMI FL 33186 PO BOX 160188 MIAMI FL 33116-0188 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For NO-T APPLICABLE Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo FUERTH, OLYMPIA Street Address (P.O. Box Number is Not Acceptable) 11540 SW 142 PL **MIAMI FL 33186** City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or primed harne of registered agont and title if applicable (NCT). Registered Agent signature required when reinstating DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. HILE Delete ШЦ Change ☐ Addition NAM! FUERTH, OLYMPIA NAME STREET ADDRESS 11540 SW 142 PLACE STRIFFADDRESS CITY-ST-ZIP MIAMI FL CHY ST 7IP HILL PD Delete HILL ☐ Change Addition NAM ARTZE, JAMIE RUTHE NAME STREET ADDRESS 12826 SW 49 TERR STREET ADDRESS CHY-SI-7IP MIAMI FL CHY SE-7P TITLE ☐ Delete 1011 ☐ Change Addition NAME NAM DOMINQUEZ, JORGE STREET ADDRESS 12861 SW 47 TERR STREET LADDRESS CITY ST-ZIP CHY ST 7IP MIAMI FL Delete 2010 Change Addition NAMI ΝΔΜΙ DOMINGUEZ, ALINA STREET ADDRESS STREEF ADDRESS 12861 SW 47 TERRACE CITY - ST- ZIP CHY ST ZIP MIAMI FL THE ☐ Delete TIME ☐ Chance ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-Z(P CHY ST 7/P TITLE ☐ Delete TITLE Change Addition NAME NAM STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CHY ST 7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Olympa