2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 08, 2006 8:00 am Secretary of State **DOCUMENT # 720216** 1. Entity Name 03-08-2006 90192 023 ****61.25 ROYAL LAKES CIVIC ASSOCIATION, INC. Principal Place of Business Mailing Address P.O. BOX 24131 JACKSONVILLE FL 32241 P.O. BOX 24131 JACKSONVILLE FL 32241 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) Applied For City & State City & State 4. FEI Number 59-2787404 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 Name LECHWAR, NORBERT Street Address (P.O. Box Number is Not Acceptable) 8400 GRAYLING DRIVE JACKSONVILLE FL 32256 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10 11. Delete Addition TITLE Change TITLE PAT ELLIS HASTINGS, CHUCK NAME NAME 8378 ALLWOOD CT. 8500 ROYALWOOD DR STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32256 CITY-ST-ZIP JACKSONVILLE FL 32256 CITY-ST-ZIE Change TITLE Delete TITLE Addition CASTRO, CIRO NAME NAME 8333 ALLWOOD COURT STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32256 CITY-ST-ZIP CITY-ST-ZIP **™** Delete Change Addition TITLE MILE PEGGYANN ZAENGER MONTAGUE, ANN NAME NAME 6151 GRAYLING DR 8661 ROYALWOOD DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32256 CITY-ST-ZIP JACKSONVILLE FL 32256 ☐ Delete Change ☐ Addition TITLE TITLE ROWE, LEE NAME 8343 ROYAL WOOD DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32256 CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Defete TITLE LECHWAR, NORBERT NAME NAME 8400 GRAYLING DRIVE STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32256 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition DAUGHERTY, MARGE NAME NAME 6261 GRAVLING DR STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32256 CITY-ST-ZIP

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:

CITY-ST-ZIP

2-26-06

(904)642-1542

FILED