2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 8:00 am
Secretary of State
03-23-2006 90012 004 ****61.25

DOCUMENT # 720296

1. Entity Name
ROYAL PARK CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1100 PONCE DE LEON CIRCLE P.O. BOX 1341 VERO BEACH, FL 32961-8341	1100 PONCE DE LEON CIRCLE P.O. BOX 1341 VERO BEACH, FL 32961-8341

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01192006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-1509560 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MCKINNON, CHARLES W
3405 OCEAN DR
VERO BEACH, FL 32963

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	YOONG, DONALD
STREET ADDRESS	110 PONCE DE LEON CIR 304N
CITY-ST-ZIP	VERO BEACH, FL 32960
TITLE	P
NAME	FREEMAN, CARLA
STREET ADDRESS	1100 PONCE DE LEON CIR 203 N
CITY-ST-ZIP	VERO BEACH, FL 32960
TITLE	TD
NAME	ROBERTS, JEANETTE
STREET ADDRESS	1100 PONCE DE LEON CIR 103 N
CITY-ST-ZIP	VERO BEACH, FL 32960
TITLE	VP
NAME	MOSGRAVE, CURTIS
STREET ADDRESS	1100 PONCE DE LEON CIRCLE, 206 E
CITY-ST-ZIP	VERO BEACH, FL 32960
TITLE	T
NAME	WHETSTINE, JOE
STREET ADDRESS	1100 PONCE DE LEON CIR 304N
CITY-ST-ZIP	VERO BEACH, FL 32960
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Joseph Whetstine JOSEPH WHETSTINE TREASURER 4/10/06 772-770-1001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #