2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 724555

Oct 13, 2009 Secretary of State

Entity Name: ROYAL PALM POINT, INC.

Current Principal Place of Business: New Prin	ncipal Place of Business:
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3250 10 ST N

NAPLES, FL 34103 US

Current Mailing Address: New Mailing Address:

3250 10 ST N

NAPLES, FL 34103 US

FEI Number: 59-1580048 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PEARSON, MICHAEL J 3250 10TH ST N C-7 NAPLES, FL 34103

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: MICHAEL J. PEARSON

OFFICERS AND DIRECTORS:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

PEARSON, MICHAEL Name: Name: Address: 3250 10TH ST N C-7 Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip:

Title: SD () Delete Title: TREA (X) Change () Addition Name: GOODETTE, BARBARA Name: GOODETTE, BARBARA

Address: 4751 GULFSHORE BLVD N PH-5 Address: 4751 GULFSHORE BLVD N PH-5

City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

Title: () Delete Title: VΡ (X) Change () Addition PEARSON, MICHAEL

Name: BIRD, TIM Name: 3250 10TH ST. N, C-7 3250 10TH ST. N, A-3 Address: Address:

City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

Title: () Delete Title: SEC () Change (X) Addition

Name: Name: MCMULLEN, ROSEMARY 45 HIGH POINT CIRCLE S.#108 Address: Address:

City-St-Zip: City-St-Zip: NAPLES, FL 34103

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: BARBARA J. GOODLETTE **TREA** 10/13/2009