

FILE NOW: FILING FEE IS \$61.25

FILED

May 01 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 728891 (3)

1. Corporation Name

ROYAL HIGHLANDS WEST PROPERTY OWNERS ASSOCIATION
, INC.

Principal Place of Business

9100 NAKOMA WAY
BROOKSVILLE FL 34613

Mailing Address

9100 NAKOMA WAY
BROOKSVILLE FL 34613-75033. Date Incorporated or Qualified
02/15/19743a. Date of Last Report
04/26/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-2033314

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☒ No

9. Name and Address of Current Registered Agent

BOWIE, BRUCE T.
9100 NAKOMA WAY
WEEKI WACHEE FL 34613

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VD ☒ DELETE
NAME LAPISH, A. PHILIP
STREET ADDRESS 9100 NAKOMA WAY
CITY-ST-ZIP BROOKSVILLE FL 34613TITLE PD ☒ DELETE
NAME ALLEN, KENNETH C.
STREET ADDRESS 9100 NAKOMA WAY
CITY-ST-ZIP BROOKSVILLE FL 34613TITLE VD ☐ DELETE
NAME MICHALEK, EDIE
STREET ADDRESS 9100 NAKOMA WAY
CITY-ST-ZIP BROOKSVILLE FL 34613TITLE VD ☒ DELETE
NAME WHELAN, CAROL
STREET ADDRESS 9100 NAKOMA WAY
CITY-ST-ZIP BROOKSVILLE FL 34613TITLE D ☐ DELETE
NAME BOWIE, BRUCE T
STREET ADDRESS 9100 NAKOMA WAY
CITY-ST-ZIP BROOKSVILLE FL 34613TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☐ Change ☒ Addition
1.2 NAME Stafford R. Peebles
1.3 STREET ADDRESS 9100 Nakoma Way
1.4 CITY-ST-ZIP Brooksville, FL 346132.1 TITLE VD ☐ Change ☒ Addition
2.2 NAME Earle H. Jordan Jr.
2.3 STREET ADDRESS 9100 Nakoma Way
2.4 CITY-ST-ZIP Weeki Wachee, FL 346133.1 TITLE VD ☐ Change ☒ Addition
3.2 NAME Barbara J. Dohm
3.3 STREET ADDRESS 9100 Nakoma Way
3.4 CITY-ST-ZIP Brooksville, FL 346134.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/97

596-5028

CR2E037 (9/96)