2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 729034 1. Entity Name POYAL POINCIANA CONDOMINIUM: INC.								08	FILE		
ROYAL POINCIANA CONDOMINIUM, INC.								00	JUN 17 P	M 1: 41	
Principal Place of Business 790 WEST 20 STREET HIALEAH, FL 33010			790	Mailing Address 730 WEST 20 STREET HIALEAH, FL 33010			XA .	TALLA	SETARY OF AHASSEE, F	STATE LORIDA	
Principal Place of Business - No P.O. Box # 3. Maili				Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.				06042008 Chg	j-NP	CR2E037 (12/0	6)	
City & State			Cit			4. FEI Number 59-1577347	,		Applied For Not Applicable		
Zip	Country		Zip		Country		5. Certificate of Stat	tus Desired	□ \$8.75 Fee Req	Additional - uired	
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent					
FOUR POINTS PROPERTY MANAGEMENT, INC. 790 WEST 20 STREET HIALEAH, FL 33010					Name	Name					
					Street A	Address (P.O. Box Number is No	ot Acceptable)			
					City	City FL Zip Code					
	named entit tions of regist	y submits this statement fered agent.	or the purp	ose of changing its	registered office of	or register	ed agent, or both, in the	ne State of Flori		ith, and accept	
SIGNATURE		or printed name of registered agen	t and title if son	ilicable (MOTE	Registered Agent signa	the state of the s	(in the connection)		DATE		
	Signature, typed	or brinteo name or registereo agen	танотине гарр	incapie. (NOTE.	Registered Agent signa	iture required	when reinstating)		DAIE		
Amended AR is \$61.25 9. Election Campaign Finance Trust Fund Contribution.							\$5.00 May Be Added to Fees		ke check payab la Department o		
10.	100	OFFICERS AND D	RECTORS		11.	/	ADDITION:/CHANGE	S TO OFFICERS			
TITLE NAME	PD GRANDA	TUIS		☐ Delete	TITLE NAME				☐ Chan	ge 🗌 Addition	
STREET ADDRESS CITY-ST-ZIP	309 SOUT	TH ROYAL POINCIAN RINGS, FL 33016		STREET ADDRESS CITY-ST-ZIP		07 70970 8	1325	95100 -001 ***6) 1.25		
TITLE	VP			Delete	TITLE	-			Chan	ge 🔲 Addition	
-NAME - STREET ADDRESS CITY-ST-ZIP	309 S. RC	MILY DYAL POINCIANA RINGS, FL 33016		-/	NAME STREET ADDRESS CITY-ST-ZIP		-				
TITLE	\$D	 -		Delete	TITLE				☐ Chan	ge 🔲 Addition	
NAME	BOSTOC			/	NAME						
STREET ADDRESS CITY-ST-ZIP	t .	YAL POINCIANA RINGS, FL 33016			STREET ADDRESS CITY-ST-ZIP						
TITLE	TD			Delete	TITLE			_	☐ Chan	ge 🔲 Addition	
NAME STREET ADDRESS	AYNAT, C	RISTINA DYAL POINCIANA		/ `	NAME STREET ADDRESS						
CITY-ST-ZIP		RINGS, FL 33016			CITY-ST-ZIP					Į.	
TITLE	DD	MADIETTA		☐ Delete	TITLE	7.0	e Presio	eNT.	Chan	ge 🗌 Addition	
NAME STREET ADDRESS		I, MARIETTA DYAL POINCIANA			NAME STREET ADDRESS	FS	tevez, h	larie	tt A		
C/TY-\$1-ZIP		RINGS, FL 33016			CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·				
TITLE	}			Delete	TITLE	500	retary.	11.	☐ Chan	ge Addition	
NAME STREET ADDRESS					NAME STREET ADDRESS	100	rh Gira	CD.	ciana		
CITY-ST-ZIP	L _				CITY-ST-ZIP	N.	ent Rocini	as F	J 3301	ا ط	
12. I hereby of	certify that the	e information supplied wit	h this filing	does not qualify for	the exemptions of	contained	in Chapter 119, Florid	la Statutes. I fu	rther certify that th	e information	
of the cor	l on this repor rocration or t)	t or supplemental report i & re ceiver or trustee emp	s true and a cowered to	accurate and that mexecute this report a	v signature shall b	nave the s apter 617	same legal effect as if r ', Florida Statutes; and	made under oa that my name :	th: that I am an offi	cer or director (
of the cor	l on this repor rocration or t)	t or supplemental report in a receiver or trustee empactiment with an address,	s true and a cowered to	accurate and that mexecute this report a	v signature shall b	nave the s apter 617	same legal effect as if i ', Florida Statutes; and	made under oa that my name a	th: that I am an offi	cer or director 0 or Block 11 if	