

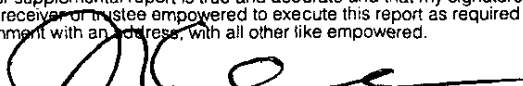


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 24, 2004 8:00 am**  
**Secretary of State**

02-24-2004 90015 009 \*\*\*\*61.25

DOCUMENT # 736618			
1. Entity Name ROYAL PALM HARBOR ASSOCIATION			
Principal Place of Business 1201 SOUTHPOINT DR. SARASOTA FL 34242		Mailing Address 1201 SOUTHPOINT DR. SARASOTA FL 34242	
2. Principal Place of Business 1216 N. Port Dr		3. Mailing Address 1216 N. Port Dr	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Sarasota Fla		City & State Sarasota Fla	
Zip 34242		Country USA	
Zip 34242		Country USA	
4. FEI Number 59-1712139		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent  ROFFMAN, HERBERT 1200 NORTHPOINT DR. SARASOTA FL 34242		7. Name and Address of New Registered Agent Name: J. Russell Klossner Street Address (P.O. Box Number is Not Acceptable) 1216 N. Port Dr. City: Sarasota FL Zip Code: 34242	
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: 2-8-04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
<b>Make Check Payable to</b> <b>Florida Department of State</b>			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAY, LESLIE PO BOX 35786 SARASOTA FL 34242 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KLAUSNER, RUSSEL 1216 NORTHPORT DR SARASOTA FL 34242 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	J. Russell Klossner <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Some address
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCHAMM, HOLLY 1232 NORTHPORT DR SARASOTA FL 34242 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Robert Donnellan <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1215 N. Port Dr Sarasota Fla 34242
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LEVITT, TAUBEL 1201 SOUTHPORT DR SARASOTA FL 34242 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Robert Savitt <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1201 So Port Dr Sarasota Fla 34242
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ROFFMAN, HERBERT 1200 NORTHPORT DR SARASOTA FL 34242 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Edith mehiel <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1240 N. Port Dr Sarasota Fla 34242
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PETERSON, PETE 1251 SOUTHPORT DR SARASOTA FL 34242 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I 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 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: 		Date: 2-6-04 Daytime Phone #	