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Secretary of State

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 739823

1. Corporation Name

ROYAL PALM APARTMENTS, INC.

99749-90016-7

Principal Place of Business

Mailing Address

241 PALM RIVER BLVD
APT. C-102
NAPLES FL 34110

241 PALM RIVER BLVD
APT. C-102
NAPLES FL 34110



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

08/03/1977

22 City & State

27 City & State

4. FEI Number
59-1789547

Applied For
Not Applicable

23 Zip Country

28 Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

24 25

29 30

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BACON, JOHN L
241 PALM RIVER BLVD
APT C-102
NAPLES FL 33942

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 *John L. Bacon, Treasurer*

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD DELETE
NAME SQUIER, EUGENE
STREET ADDRESS 221 PALM RIVER BLVD
CITY-ST-ZIP NAPLES, FL 00000

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
D GEORGE T. SCIUK
281 PALM RIVER BLVD APT A-201
NAPLES, FL 34110 Change Addition

TITLE D DELETE
NAME REICH, FRED
STREET ADDRESS 281 PALM RIVER BLVD., APT. A202
CITY-ST-ZIP NAPLES FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
P Change Addition

TITLE D DELETE
NAME POETKER, WILLIAM
STREET ADDRESS 281 PALM RIVER BLVD., APT. A101
CITY-ST-ZIP NAPLES FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
 Change Addition

TITLE D DELETE
NAME HANCUR, GERALD
STREET ADDRESS 201 PALM RIVER BLVD, APT E202
CITY-ST-ZIP NAPLES FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
 Change Addition

TITLE D DELETE
NAME RABER, LYLE C
STREET ADDRESS 201 PALM RIVER BLVD
CITY-ST-ZIP NAPLES, FL 00000

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
 Change Addition

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
 Change Addition

14. 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 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, with all other like empowered.

SIGNATURE *John L. Bacon* SIGNATURE REQUIRED *Reich*

1-4-99

941-596-1196

CR2E037 (1/198)