

185 **2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Apr 12, 2006 8:00 am
Secretary of State

04-12-2006 90085 011 ****61.25

DOCUMENT # 745726

1. Entity Name

ROYAL PINES CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

% STERLING MANAGEMENT SERVICES
2880 SCHERER DR. N. SUITE 840
ST. PETERSBURG FL 33716
US

Mailing Address

% STERLING MANAGEMENT SERVICES
2880 SCHERER DR. N. SUITE 840
ST. PETERSBURG FL 33716
US



2. Principal Place of Business

Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Sterling Management Services
2870 Scherer Drive N., Suite 100
St. Petersburg, FL 33716

1st MOORE

CR2E037 (10/05)

City & State

City & State

4. FEI Number

59-1984910

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRUDNY, MICHAEL
28100 US 19 N STE 300
CLEARWATER FL 33761

Name
BRUDNY, MICHAEL
Street Address (P.O. Box Number is Not Acceptable)
200 N. PINE AVE
SUITE A
City
OLDSMAR
FL
Zip Code
34677

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Delete
P	WARNER, JOHN	4500 EAST BAY DR., #J134	CLEARWATER FL 33764	<input checked="" type="checkbox"/>
VPD	THOMASON, PATRICIA MS.	4410 WALTHAM AVE.	TAMPA FL 33634-7346	<input type="checkbox"/>
T	LITERAL, LORI	4500 E BAY DR J-132	CLEARWATER FL 33764	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
	DP Thomason, Patricia	4410 WALTHAM AVE	Tampa, FL 33634	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	DST HARTUNG, JOHN	4500 E BAY DR J 133	CLEARWATER, FL 33764	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: PATRICIA THOMASON Patricia Thomason 3/31/06 913-885-6423
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR