## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#751883**

FILED Feb 02, 2006 Secretary of State

Entity Name: ROYAL HARBOR HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4743 SE CHEERIO WAY STUART, FL 34997

Current Mailing Address: New Mailing Address:

4743 SE CHEERIO WAY STUART, FL 34997 US

FEI Number: 14-3167868 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GAFFNEY, JOHN T 4743 SE CHEERIO WAY STUART, FL 34997 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 SD () Delete
 Title:
 S (X) Change () Addition

 Name:
 BARTLIN, HERMAN V
 Name:
 BARTLIN, HERMAN V

 Address:
 4722 SE CHEERIO WAY
 Address:
 4722 SE CHEERIO WAY

Address: 4722 SE CHEERIO WAY Address: 4722 SE CHEERIO WAY
City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997

Title: PD () Delete Title: (X) Change ( ) Addition GAFFNEY, JOHN F Name: Name: GAFFNEY, JOHN F Address: 4743 SE CHEERIO WAY Address: 4743 SE CHEERIO WAY City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997

Title: TDV ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 PACKER, JAMES R
 Name:
 PACKER, JAMES R

 Address:
 4742 SE CHEERIO WAY
 Address:
 4742 SE CHEERIO WAY

 City-St-Zip:
 STUART, FL 34997
 City-St-Zip:
 STUART, FL 34997

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES R. PACKER T 02/02/2006