2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#752042

FILED Jan 14, 2009 Secretary of State

Entity Name: ROYAL PALM AT PLANTATION CONDOMINIUM ASSOCIATION, INC.

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

C/O MIAMI MANAGEMENT 1145 SAWGRASS CORP PKWY SUNRISE, FL 33323

Current Mailing Address: New Mailing Address:

C/O MIAMI MANAGEMENT 1145 SAWGRASS CORP PKWY SUNRISE, FL 33323

FEI Number: 59-2141520 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:

EISINGER, DENNIS 4000 HOLLYWOOD BLVD #S 265 HOLLYWOOD, FL 33021 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:

() Delete (X) Change () Addition EVERHART, CONSTANCE TODD, ZENCHAK Name: Name: 1145 SAWGRASS CORP PKWY Address: 1145 SAWGRASS CORP PKWY Address: City-St-Zip: SUNRISE, FL 33323 City-St-Zip: SUNRISE, FL 33323

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

ZENCHAK, TODD Name: JOHN, SPOHN Name:

Address: 1145 SAWGRASS CORP PKWY Address: 1145 SAWGRASS CORP PKWY

City-St-Zip: SUNRISE, FL 33323 City-St-Zip: SUNRISE, FL 33323

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

FIDINGER, DON BRUCE, RANDOLPH Name: Name: 1145 SAWGRASS CORP 1145 SAWGRASS CORP Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33323 City-St-Zip: FORT LAUDERDALE, FL 33323

Title: Title: () Change () Addition () Delete

Name: DOTY, DENNIS Name: 1145 SAWGRASS CORP PKWY Address: Address: City-St-Zip: SUNRISE, FL 33323 City-St-Zip:

Title: () Delete Title: () Change () Addition

RANDOLPH, BRUCE Name: Name: 1145 SAWGRASS CORP PKWY Address: Address: City-St-Zip: SUNRISE, FL 33323 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TODD ZENCHAK Ρ 01/14/2009