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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



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

DOCUMENT # 754318

1. Corporation Name

ROYALE TOWERS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

1830 N ATLANTIC AVE
C808
COCOA BCH FL 32931
US

Mailing Address

1830 N ATLANTIC AVE C106
C808
COCOA BCH FL 32931
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

3. Date Incorporated or Qualified

09/24/1980

4. FEI Number

59-2021866

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

RICHARDS, FREDERICK W.
503 N ORLANDO AVE
COCOA BEACH FL 32931

10. Name and Address of New Registered Agent

81 Name BECKER & POLIAKOFF, P.A.
c/o C. JOHN CHRISTENSEN, ESQ.

82 Street Address (P.O. Box Number is Not Acceptable)

83 500 Winderley Place, Suite 104

84 City Maitland FL 85 Zip Code 32751

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE: 1/15/99

12. OFFICERS AND DIRECTORS

TITLE VD
NAME TRACY, JANE S
STREET ADDRESS 1860 N ATLANTIC AV B304
CITY-ST-ZIP COCOA BCH, FL 00000 ☐ DELETE

TITLE S
NAME WANN, SUSAN
STREET ADDRESS 1830 N ATLANTIC AVE
CITY-ST-ZIP COCOA BCH FL 32931 ☐ DELETE

TITLE MAL
NAME GILBERT, RICHARD
STREET ADDRESS 1860 N ATLANTIC AVE B607
CITY-ST-ZIP COCOA BEACH FL 32931 ☐ DELETE

TITLE TD
NAME GRESSANI, DAVID
STREET ADDRESS 1890 N. ATLANTIC AVE. A507
CITY-ST-ZIP COCOA BCH FL ☐ DELETE

TITLE PD
NAME SANDMAN, WAYNE E
STREET ADDRESS 1830 NORTH ATLANTIC AVENUE, #C301
CITY-ST-ZIP COCOA BEACH FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

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

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

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

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS 3613 S. BANANA RIVER BLVD #D406
5.4 CITY-ST-ZIP COCOA BEACH, FL 32931

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

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: David Gressani, Treasurer David Gressani

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/15/99 (407) 783 1830

CR2E037 (11/98)