

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2006 8:00 am
Secretary of State

07-26-2006 90003 048 ****61.25

DOCUMENT # 764127

1. Entity Name
ROYAL PALM VILLAGE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**15180 MEADOW CIRCLE
FT. MYERS, FL 33908**

Mailing Address
**15180 MEADOW CIRCLE
FT. MYERS, FL 33908**

50023251



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07172006

Chg-NP

CR2E037 (4/06)

City & State

City & State

4. FEI Number
59-2224364

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

**ADAMS, JOSEPH E
14241 METROPOLIS AVE
SUITE 100
FT MYERS, FL 33912-0000**

Name

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

City

FL

Zip Code

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

**Filing Fee is \$61.25
Due by September 6, 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Delete
NAME **FOLKENING, DON**
STREET ADDRESS **15320 MEADOW CIRCLE**
CITY-ST-ZIP **FORT MYERS, FL 33908**

TITLE **P** ☐ Change ☒ Addition
NAME **HARRIS, ROBERT**
STREET ADDRESS **15200 MEADOW CIRCLE**
CITY-ST-ZIP **FORT MYERS, FL 33908**

TITLE **D** ☐ Delete
NAME **PATETE, MIKE**
STREET ADDRESS **15370 MEADOW CIRCLE**
CITY-ST-ZIP **FORT MYERS, FL 33908**

TITLE **P** ☐ Change ☒ Addition
NAME **CARRA, JOHN**
STREET ADDRESS **15261 ASPEN DRIVE**
CITY-ST-ZIP **FORT MYERS, FL 33908**

TITLE **D** ☐ Delete
NAME **DENNER, WAYNE**
STREET ADDRESS **15070 ASPEN DRIVE**
CITY-ST-ZIP **FT MYERS, FL 33908**

TITLE **D** ☒ Change ☐ Addition
NAME **DANNER**
STREET ADDRESS **=**
CITY-ST-ZIP **=**

TITLE **T** ☐ Delete
NAME **ECKART, DON**
STREET ADDRESS **15190 MEADOW CIRCLE**
CITY-ST-ZIP **FORT MYERS, FL 33908**

TITLE **P** ☐ Change ☒ Addition
NAME **CONNER, BRENDA**
STREET ADDRESS **15271 ASPEN DRIVE**
CITY-ST-ZIP **FORT MYERS, FL 33908**

TITLE **D** ☒ Delete
NAME **TROMBLEY, PHILIP**
STREET ADDRESS **15030 MEADOW CIRCLE**
CITY-ST-ZIP **FORT MYERS, FL 33908**

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **D** ☒ Delete
NAME **HUNTER, LINDA**
STREET ADDRESS **15250 MEADOW CIRCLE**
CITY-ST-ZIP **FORT MYERS, FL 33908**

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Donald E. Eckart TRUSTEE DONALD E. ECKART

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-17-06

Date

239-482-7516 **FL**
919-382-7347 **NC**

Daytime Phone #