2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#770840

FILED Apr 25, 2006 Secretary of State

Entity Name: ROYAL OAK VILLAS HOME OWNERS ASSOCIATION, INC.

| Entity Name: ROYAL OAK VILLAS HOME OWNERS ASSOCIATION, INC. | | | | | |
|--|--|------------------------------------|--|-----------------------------------|--|
| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
| 4400 HIGH SUITE 313 NICEVILLE | WAY 20 E , FL 32578 | US | | | |
| Current Ma | ailing Addre | ess: | New Mailing Addre | New Mailing Address: | |
| P O BOX 5 NICEVILLE | 036 , FL 32578 | US | | | |
| FEI Number: | 59-2594766 | 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: | | | | | |
| BURMAN, LINDA 1000 BAY DRIVE #510 NICEVILLE, FL 32578 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. | | | | | |
| SIGNATUR | RE: | | | | |
| | Electro | onic Signature of Registered Agent | | Date | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | STD (LINDSTROM, 1000 BAY DR NICEVILLE, F | R, #524 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | PD (DELBELLO, 1 1000 BAY DR NICEVILLE, F | RIVE #525 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VPD (BURMAN, LIN 100 BAY DRI' NICEVILLE, F | VE #510 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| | | | | | |

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: THOMAS J DELBELLO P 04/25/2006