


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 20, 2007 8:00 am**  
**Secretary of State**

03-20-2007 90012 030 \*\*\*150.00

**DOCUMENT # H50301**

1. Entity Name  
**THE REGAL HOMEOWNERS' ASSOCIATION, INC.**



Principal Place of Business  
**2141 RIDGE ROAD, LOT #31  
 LARGO FL 33778**

Mailing Address  
**2141 RIDGE ROAD, LOT #31  
 LARGO FL 33778**



2. Principal Place of Business - No P.O. Box #  
**2141 Ridge Rd**

Suite, Apt. #, etc.  
**Lot 17**

City & State  
**Largo Florida**

Zip  
**33778**

Country  
**USA**

3. Mailing Address  
**2141 Ridge Rd**

Suite, Apt. #, etc.  
**Lot 17**

City & State  
**Largo Florida**

Zip  
**33778**

Country  
**USA**

1st MOORE CR2E034 (10/06)

4. FEI Number **59-2519317** Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**FORD, EDWIN I.  
 2307 WEST BAY DRIVE  
 LARGO FL 33540**

7. Name and Address of New Registered Agent

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 \_\_\_\_\_ DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
P	GLIBBERT, HARVE	LOT 782141 RIDGE RD	LARGO FL 33778	<input type="checkbox"/>
T	COLLIER, HERB	2141 RIDGE RD 62	LARGO FL 33778	<input checked="" type="checkbox"/>
S	SYNDER, GINGER	2141 RIDGE RD 35	LARGO FL 33778	<input checked="" type="checkbox"/>
D	SMITH, ALEX	LOT 25 2141 RIDGE RD	LARGO FL 33778	<input checked="" type="checkbox"/>
V	STEMEN, IDELLE	LOT 40 2141 RIDGE RD	LARGO FL 33778	<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
T	Don Stemen	Lot 40 2141 Ridge Rd	Largo Florida 33778	<input checked="" type="checkbox"/>	<input type="checkbox"/>
S	Diane Broussardes	Lot 17 2141 Ridge Rd	Largo Florida 33778	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	Tom White	2141 Ridge Rd # 68	Largo Florida 33778	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	John Gianakakis	2141 Ridge Rd # 42	Largo Florida 33778	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Bill malnick	2141 Ridge Rd # 36	Largo Florida 33778	<input type="checkbox"/>	<input checked="" type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 607, 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: **Diane K Broussardes** Date: **3/7/07** Daytime Phone #: **1-727-812-4131**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR