

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 16, 2007 8:00 am**  
**Secretary of State**

01-16-2007 90257 048 \*\*\*158.75

**DOCUMENT # K30256**



1. Entity Name  
**ROYAL DEVELOPMENT AND MANAGEMENT CORP.**

Principal Place of Business  
**103 COMMERCE ST.  
STE. 120  
LAKE MARY, FL 32746**

Mailing Address  
**103 COMMERCE ST.  
STE. 120  
LAKE MARY, FL 32746**

**50000027**



2. Principal Place of Business - No P.O. Box #  
**3631 WIMBLEDON DRIVE**  
Suite, Apt. #, etc.

3. Mailing Address  
**3631 WIMBLEDON DRIVE**  
Suite, Apt. #, etc.

01112007 Chg-P CR2E034 (12/06)

City & State  
**LAKE MARY FL**  
Zip  
**32746**  
Country  
**USA**

City & State  
**LAKE MARY FL**  
Zip  
**32746**  
Country  
**USA**

4. FEI Number  
**59-2930555**  
Applied For  
☐ Not Applicable

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

**6. Name and Address of Current Registered Agent**

**LATHAN, ROY  
3631 WIMBLEDON DRIVE  
LAKE MARY, FL 32746**

**7. Name and Address of New Registered Agent**

Name  
**SAME AS BEFORE**  
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 *Roy Lathan*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

*January 10, 2007*  
DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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  
**PVD  
LATHAN, ROY R P  
3631 WIMBLEDON DRIVE  
LAKE MARY, FL** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**STD  
LATHAN, LOUISE  
103 COMMERCE ST. STE 120  
LAKE MARY, FL** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
  
☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

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

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**STD V.P.  
LOUISE LATHAN  
3631 WIMBLEDON DRIVE  
LAKE MARY FL** ☒ Change ☐ Addition

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

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

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

TITLE  
NAME  
STREET ADDRESS  
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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #