## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N02000001909

FILED Nov 22, 2006 Secretary of State

Entity Name: ROYAL PALM VILLAS OF NAPLES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:** New Principal Place of Business:

175 FIFTH STREET SOUTH 800 SEAGATE DRIVE

NAPLES, FL 34102 SUITE 202

NAPLES, FL 34103

**Current Mailing Address:** New Mailing Address:

1155 FOURTH STREET SOUTH 800 SEAGATE DRIVE

NAPLES, FL 34102 SUITE 202

NAPLES, FL 34103 US

FEI Number: 20-1201233 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THOMPSON, STUART A ESQ 2272 AIRPORT ROAD SOUTH SUITE 101

NAPLES, FL 34112 US

BLUME, CRAIG D ESQ. 800 HARBOUR DRIVE NAPLES, FL 34103

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.

SIGNATURE: CRAIG D. BLUME, ESQ. 11/22/2006

> Electronic Signature of Registered Agent Date

> > City-St-Zip:

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

GOLDBERG, GERALD I CROSS, KENNETH P Name: Name: 486 SECOND AVENUE NORTH Address: 165 5TH ST. S. Address: City-St-Zip: NAPLES, FL 34102 NAPLES, FL 34102 US

Title: () Delete Title: (X) Change ( ) Addition

Name: LEWIS, JEROME P Name: CASEY, MICHAEL Address: C/O 486 SECOND AVENUE NORTH Address: PO BOX 1065

City-St-Zip: NAPLES, FL 34102 City-St-Zip: ASHBURN, VA 20146 US

Title: () Delete Title: D.S (X) Change ( ) Addition

BINDER, BURTON A Name: MOKRYSZ, PHILIP Name: 1155 FOURTH STREET SOUTH C/O 800 SEAGATE DRIVE, SUITE 202 Address: Address:

City-St-Zip: NAPLES, FL 34102 City-St-Zip: NAPLES, FL 34103 US

Title: () Delete Title: D,T ( ) Change (X) Addition

Name: Name: SABA, THEOPHILE E Address: Address: 17201 PALOMINO CT. City-St-Zip: City-St-Zip: OLNEY, MD 20832 US

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: KENNETH P. CROSS Ρ 11/22/2006