EILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N04295

FT MYERS FL 33919

ROYAL COURT CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 1412 ROYAL PALM SQUARE BLVD #101 Mailing Address

1412 ROYAL PALM SQ BLVD

SUITE 103

FILED Mar 29, 1999 8:00 am § Secretary of State

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2. Principal Place of Business 21	
Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number	
	Applied For
27 59-2447822	Not Applicable
City & State 5. Certificate of Status Desired	\$8.75 Additional Fee Required
7 Country 7 Tip Country 6 Election Compaign Financing	\$5.00 May Be
24 25 29 30 Trust Fund Contribution	Added to Fees
9. Name and Address of Current Registered Agent 10. Name and Address of New Regis	stered Agent
81 Name AAAAA 1 In	COHEN
CHOEN, MARSHALL L 82 Street Address (P.O. Box Number is Not Acceptable)	

1412 ROYAL PALM SQUARE BLVD	
SUIF 103	
ESTERO FL 32919 84 City FORT MYERS	FL 85 Zip Code 19
the plant of the pure	nose of changinh its redistared
 Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits the statement for the purpoffice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. 	appointment as registered
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE PD DELETE 1.1 TITLE	☐ Change ☐ Addition
The Property of the Property o	
OANTEIG HEITI	
STREET ADDRESS 1412 ROYAL PALM SQ BLVD 1.3 STREET ADDRESS	
CITY-ST-ZIP FT MYERS FL 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE D DELETE 2.1 TITLE	Change
NAME OVERLY; DONNA G. 22 NAME	
STREET ADDRESS 1412 ROYAL PALM SQ. BLVD 2.3 STREET ADDRESS	
CITY-ST-ZIP FT MYERS FL 2.4 CITY-ST-ZIP	
TITLE TD SITTLE 3.1 TITLE	☐ Change ☐ Addition
NAME COHEN, MARSHALL L 32 NAME	
STREET ADDRESS 1412-ROYAL PALM SQUARE BLVD, SUITE 103 3.3 STREET ADDRESS	
CITY_ST_ZIP FSTFRO FL 33919	
TITLE DELETE 4.1 TITLE Director	☐ Change
NAME ISAMES JAMES COREY VE	PTICH
NAME JAMES COREY VE STREET ADDRESS 1412 ROYAL FALLINGE	VIN PLIKE
CITY-ST-ZIP PORT WICK J. FU	137019 TE 10
TITLE DELETE 5.1 TITLE	☐ Change ☐ Addition
5.2 MAME	
NAME	
STREET ADDRESS 3.3 STREET ADDRESS	
FACITY CT 7ID	
CITY-ST-ZIP 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE . □ DELETE 6.1 TITLE	☐ Change ☐ Addition
CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE □ DELETE 6.1 TITLE NAME 6.2 NAME	☐ Change ☐ Addition
CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filling does not indicated on this annual report by supplemental annual report is too officer or director of the corporation or the recoper or turnite employed vialify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of the control of the cont