

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 16, 2007 8:00 am
Secretary of State

05-16-2007 90015 011 ****61.25

DOCUMENT # N05000012875

1. Entity Name
ROYAL POINCIANA CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**1275 SW 46TH AVE
POMPAÑO BEACH, FL 33069**

Mailing Address
**1145 SAWGRASS CORP PKWY
SUNRISE, FL 33323**

40114342



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

05082007 Chg-NP CR2E037 (12/06)

4. FEI Number
20-4251319

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KATZMAN & KORR, P.A.
1501 NORTHWEST 49TH STREET
STE 202
FORT LAUDERDALE, FL 33309**

Name

Street

City

**The Law Offices of Katzman & Korrr
1501 Northwest 49th Street, Suite 202
Fort Lauderdale, Florida 33309**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Ferran L. Korrr, Esq. **5/14/07**

**Filing Fee is \$61.25
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
KRONENBERG, MORTON
140 N.E. 28 AVENUE, #509
POMPAÑO BEACH, FL 33062** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVP
DAVID C. FRENCIK
1243 SW 46th AVENUE #1105
POMPAÑO BEACH, FL 33069** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVP
REA, LEONARD
1261 S.E. 46 AVENUE, #2004
POMPAÑO BEACH, FL 33069** ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DST
CHATOMAL, HARESH
4241 WEST MC NAB ROAD
POMPAÑO BEACH, FL 33069** ☐ Delete

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

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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 617, 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 #

Morton Kronenberg

5/9/07 954 684 4400