

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 05, 2011
Secretary of State

Entity Name: ROYAL WOODS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

951 BROKEN SOUND PKWY STE 108
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

951 BROKEN SOUND PKWY STE 108
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 14-1953940

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROYLE, PHILIP J P.A.
370 W CAMINO GARDENS BLVD.
SUITE 300
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SCHNEIDER, MERYL
Address: 22174 MAJESTIC WOODS WAY
City-St-Zip: BOCA RATON, FL 33428

Title: TD
Name: AMSTEL, HEDDY
Address: 22102 MAJESTIC WOODS WAY
City-St-Zip: BOCA RATON, FL 33428

Title: D
Name: ZINGG, IRENE
Address: 22197 MAJESTIC WOODS WAY
City-St-Zip: BOCA RATON, FL 33428

Title: SD
Name: JACKSON, RICHARD M
Address: 22181 MAJESTIC WOODS WAY
City-St-Zip: BOCA RATON, FL 33428

Title: VPD
Name: HAYES, PAULA
Address: 22098 MAJESTIC WOODS WAY
City-St-Zip: BOCA RATON, FL 33428

I hereby 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 all other like empowered.

SIGNATURE: PHILIP CROYLE

RA

01/05/2011

Electronic Signature of Signing Officer or Director

Date