

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2004 8:00 am
Secretary of State

03-15-2004 90011 001 ****61.25

DOCUMENT # N20356

1. Entity Name

ROYAL COACH ESTATES, INC.



Principal Place of Business

C/O MARLIN FITZ
15390 HART RD C8
NORTH FORT MYERS FL 33917
US

Mailing Address

C/O MARLIN FITZ
15390 HART RD C8
NORTH FORT MYERS FL 33917
US

54018350



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
65-0017301

Applied For
Not Applicable

Zip

Country

Zip

Country

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

FITZ, MARLIN
15390 HART RD
C8
NORTH FORT MYERS FL 33917

Name

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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 P
NAME JEANETTE, JOHN ☐ Delete
STREET ADDRESS 15390 HANT RD. C9
CITY-ST-ZIP NORTH FORT MYERS FL 33917

TITLE ☐ Change ☐ Addition
NAME Not Here (Sick)
STREET ADDRESS
CITY-ST-ZIP

TITLE SD
NAME MITCHELL, JAN ☐ Delete
STREET ADDRESS 15390 HART RD A27
CITY-ST-ZIP N FORT MYERS FL 33917

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

TITLE D
NAME FITZ, JEAN ☒ Delete
STREET ADDRESS 15390 HART RD C-8
CITY-ST-ZIP N FORT MYERS FL 33917

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

TITLE D
NAME SMITH, CHRISTINA ☐ Delete
STREET ADDRESS 15390 HART RD B-20
CITY-ST-ZIP N FORT MYERS FL 33917

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

TITLE VP
NAME FITZ, JEAN ☐ Delete
STREET ADDRESS 15390 HAWT RD, C8
CITY-ST-ZIP NORTH FORT MYERS FL 33917

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

TITLE D
NAME EAST, DOWIS ☐ Delete
STREET ADDRESS 15390 HANT RD. C4
CITY-ST-ZIP NORTH FORT MYERS FL 33917

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Marlin Fitz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/04
Date

239-731-3015
Daytime Phone #