

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90194 025 ****70.00

DOCUMENT # N21700					
1. Entity Name ROYAL PALM COVE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 21045 COMMERCIAL TR BOCA RATON, FL 33486 US			Mailing Address 21045 COMMERCIAL TR BOCA RATON, FL 33486 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0107336	
				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	
WILLIAM K. ISAACSON, C/O LANG MANAGEMENT COMPANY, INC. 21045 COMMERCIAL TRAIL BOCA RATON, FL 33486-1006				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 _____ (NOTE: Registered Agent signature required when reconstituting) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		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	VP ACKERMAN, DONNA 17038 ROYAL COVE WAY BOCA RATON, FL 33496 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS STEPHEN RAPAPORT 17189 ROYAL COVE WAY BOCA RATON FL 33496 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MEYER, MARTIN 17030 ROYAL COVE WAY BOCA RATON, FL 33496 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D AVIDANE, ELIZABETH 17029 ROYAL COVE WAY BOCA RATON, FL 33496 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SE P HERSON, MILTON 17173 ROYAL COVE WAY BOCA RATON, FL 33496 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD KLEIN, LEON 17046 ROYAL COVE WAY BOCA RATON, FL 33496 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P GERALD MAHONEY 17101 ROYAL COVE WAY BOCA RATON FL ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition		
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: _____ Date: 4/11/06 Daytime Phone # _____					