

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22522

FILED  
Feb 12, 2011  
Secretary of State

**Entity Name:** MOUNT ROYAL ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

132 WILLIAM BARTRAM DRIVE  
WELAKA, FL 32193

**New Principal Place of Business:**

100 WILLIAM BARTRAM DRIVE  
CRESCENT CITY, FL 32112 US

**Current Mailing Address:**

P O BOX 423  
WELAKA, FL 32193

**New Mailing Address:**

100 WILLIAM BARTRAM DRIVE  
CRESCENT CITY, FL 32112 US

**FEI Number:** 59-2960995

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ALLEN, HENRY L  
132 WILLAM BARTRAM DRIVE  
WELAKA, FL 32193 US

**Name and Address of New Registered Agent:**

PETERSON, ALFRED  
127 WILLAM BARTRAM DRIVE  
WELAKA, FL 32193 US

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: ALFRED PETERSON

02/12/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ALLEN, HENRY L  
Address: 132 WILLIAM BARTRAM DRIVE  
City-St-Zip: CRESCENT CITY, FL 32112

Title: V/D  
Name: RINEHART, JERRY  
Address: 130 WILLIAM BARTRAM DRIVE  
City-St-Zip: CRESCENT CITY, FL 32112 US

Title: T/D  
Name: CARTIN, G M II  
Address: 107 DEXTER COURT  
City-St-Zip: CRESCENT CITY, FL 32112 US

Title: S/D  
Name: OGONOWSKI, CARLA  
Address: 156 MOUNT ROYAL AVE.  
City-St-Zip: CRESCENT CITY, FL 32112

Title: D  
Name: RUSH, ELIZABETH  
Address: 109 DEXTER COURT  
City-St-Zip: CRESCENT CITY, FL 32112

Title: P/D  
Name: PETERSON, ALFRED  
Address: 127 WILLIAM BARTRAM DRIVE  
City-St-Zip: CRESCENT CITY, FL 32112

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: G. M. CARTIN II.

T/D

02/12/2011

Electronic Signature of Signing Officer or Director

Date