


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2006 8:00 am
Secretary of State

03-10-2006 90002 018 ****70.00

DOCUMENT # N31275 1. Entity Name ROYAL OAK COMMUNITY ASSOCIATION, INC.					
Principal Place of Business C/O RALPH W LAKE P.O. BOX 2466 DUNEDIN, FL 34697 US			Mailing Address C/O RALPH W LAKE P.O. BOX 2466 DUNEDIN, FL 34697 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 59-2480430				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				03072006 Chg-NP CR2E037 (11/05)	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
KINKEAD, RONALD L 1241 ROYAL OAK DR DUNEDIN, FL 34698			Name Joyce M. Holbrook TVD		
			Street Address (P.O. Box Number is Not Acceptable) 1206 Royal Oak Drive		
			City Dunedin FL Zip Code 34698		
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 <u>Joyce M Holbrook TVD</u> DATE <u>3/7/06</u>					
Filing Fee is \$61.25 Due by May 1, 2006					
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	SJD SNYDER, SUSAN 1204 ROYAL OAK DR DUNEDIN, FL 34698 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Gridley, Marcella 1234 Royal Oak Drive Dunedin, FL 34698		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KINKERD, RON 1241 ROYAL OAK DR DUNEDIN, FL 34698 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Kin Kead, Ron 1241 Royal Oak Dr Dunedin, FL 34698		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TVD HOLBROOK, JOYCE 1206 ROYAL OAK DR DUNEDIN, FL 34698 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEMP, JON 1228 ROYAL OAK DR DUNEDIN, FL 34698 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Miller, Jim 1221 Royal Oak Drive Dunedin, FL 34698		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Joyce M Holbrook</u> DATE <u>3/7/06</u> 727-736-0767					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					