



2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2007 8:00 am
Secretary of State

01-11-2007 90071 014 ****61.25

DOCUMENT # N31275 1. Entity Name ROYAL OAK COMMUNITY ASSOCIATION, INC.					
Principal Place of Business C/O RALPH W LAKE <i>Decceased</i> 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 - No P.O. Box # <i>Delete - C/O Ralph Lake</i>		3. Mailing Address Suite, Apt. #, etc.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01082007 Chg-NP CR2E037 (12/06)	
City & State		City & State		4. FEI Number 59-2480430	
Zip		Country		Applied For <input type="checkbox"/> Not Applicable	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HOLBROOK, JOYCE M 1206 ROYAL OAK DR DUNEDIN, FL 34698				7. Name and Address of New Registered Agent Name <i>JANET L. HOLT</i> Street Address (P.O. Box Number is Not Acceptable) <i>1257 ROYAL OAK DR</i> <i>DUNEDIN</i> City FL Zip Code <i>34698</i>	
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 reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2007		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	SD GRIDLEY, MARRELLA 1234 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	PD KINKERD, RON 1241 ROYAL OAK DR DUNEDIN, FL 34698 <input checked="" type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURE JANET L. HOLT 1257 ROYAL OAK DUNEDIN, FL 34698 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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 MILLER, JIM 1221 ROYAL OAK DR DUNEDIN, FL 34698 <input checked="" 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
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: <i>Janet L. Holt</i> JANET L. HOLT 1-8-07 727-736-2166					