

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35004

FILED
Apr 15, 2009
Secretary of State

Entity Name: ROYAL ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2755 BORDER LAKE ROAD
SUITE 101
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

2755 BORDER LAKE ROAD
SUITE 101
APOPKA, FL 32703

New Mailing Address:

FEI Number: 59-2976955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KANAGA, MERIDYTHE
2755 BORDER LAKE ROAD
SUITE 101
APOPKA, FL 32703 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MACCUBBIN, TOM
Address: 1526 ROYAL CIRCLE
City-St-Zip: APOPKA, FL 32703

Title: DVP () Delete
Name: GRIFFIN, JOHN
Address: 1494 ROYAL CIRCLE
City-St-Zip: APOPKA, FL 32703

Title: DT () Delete
Name: SCHLOTTMANN, JOAN
Address: 1450 ROYAL CIRCLE
City-St-Zip: APOPKA, FL 32703

Title: DS () Delete
Name: STANTON, JOHN
Address: 1562 ROYAL CIRCLE
City-St-Zip: APOPKA, FL 32703

Title: D () Delete
Name: PIETRUSKA, DON
Address: 1550 ROYAL CIRCLE
City-St-Zip: APOPKA, FL 32703

Title: D () Delete
Name: OSTRANDER, DIANA
Address: 1497 ROYAL CIRCLE
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: STANTON, JOHN
Address: 1562 ROYAL CIRCLE
City-St-Zip: APOPKA, FL 32703

Title: DS (X) Change () Addition
Name: MILLAGE, MARK
Address: 1550 ROYAL CIRCLE
City-St-Zip: APOPKA, FL 32703

Title: D (X) Change () Addition
Name: ROECKER, PAUL
Address: 1506 ROYAL CIRCLE
City-St-Zip: APOPKA, FL 32703

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MARK MILLAGE

DS

04/15/2009

Electronic Signature of Signing Officer or Director

Date