

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N48219** (2)

1. Corporation Name

ROYAL GARDEN ESTATES HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

**6904 CORTEZ ROAD
BRADENTON FL 34209**

Mailing Address

**6904 CORTEZ ROAD
BRADENTON FL 34209**

3. Date Incorporated or Qualified
04/06/1992

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 **6904 Cortez Rd**

26 **6904 Cortez Rd W**

4. FEI Number
13-1383630

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27 **LOT 228**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

City & State

City & State

23 **Bradenton FL**

28 **Bradenton FL**

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip

Country

Zip

Country

24 **34209**

25 **Manatee**

29 **34209**

30 **Manatee**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KORP, WILLIAM R
333 SOUTH TAMiami TRAIL
SUITE 199
VENICE FL 34285**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	☒ DELETE
NAME	BROOKS, HERB	
STREET ADDRESS	6904 CORTEZ RD LOT #205	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	D	☐ DELETE
NAME	WILLIAMS, ARNOLD	
STREET ADDRESS	6904 CORTEZ RD LOT #228	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	D	☒ DELETE
NAME	FRIEND, C R	
STREET ADDRESS	6904 CORTEZ RD LOT #130	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	D	☒ DELETE
NAME	FAULKNER, MILO	
STREET ADDRESS	6904 CORTEZ RD LOT #152	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	D	☐ DELETE
NAME	VAN BUSKIRK, VERNON	
STREET ADDRESS	6904 CORTEZ RD LOT #81	
CITY-ST-ZIP	BRADENTON FL 34209	

1.1 TITLE	PRES	☐ Change ☒ Addition
1.2 NAME	Mary Williams	
1.3 STREET ADDRESS	6904 Cortez Rd Lot 228 Bradenton FL 34209	
1.4 CITY-ST-ZIP	Bradenton FL 34209	
2.1 TITLE	Secretary	☐ Change ☒ Addition
2.2 NAME	Agnes Gesting	
2.3 STREET ADDRESS	Bradenton	
2.4 CITY-ST-ZIP	6904 Cortez Rd Lot 116 FL 34209	
3.1 TITLE	Treas	☐ Change ☒ Addition
3.2 NAME	Norman Haines	
3.3 STREET ADDRESS	6904 Cortez Rd Lot 66	
3.4 CITY-ST-ZIP	Bradenton FL 34209	
4.1 TITLE	D	☐ Change ☒ Addition
4.2 NAME	Gertrude Bechtel	
4.3 STREET ADDRESS	6904 Cortez Rd Lot 187	
4.4 CITY-ST-ZIP	Bradenton FL 34209	
5.1 TITLE	D	☐ Change ☒ Addition
5.2 NAME	Margaret Hennessey	
5.3 STREET ADDRESS	6904 Cortez Rd Lot 192	
5.4 CITY-ST-ZIP	Bradenton FL 34209	
6.1 TITLE	D	☐ Change ☒ Addition
6.2 NAME	Robert Bobernitz	
6.3 STREET ADDRESS	6904 Cortez Rd Lot 79	
6.4 CITY-ST-ZIP	Bradenton FL 34209	

6.1 TITLE **VP.** ☒ Addition
6.2 NAME **Kitty Thornby**
6.3 STREET ADDRESS **6904 Cortez Rd Lot 100**
6.4 CITY-ST-ZIP **Bradenton FL 34209**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Norman Haines** **Norman Haines**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-8-96

94-794-2161

Date

Daytime Phone #

CR2E037 (12/95)