


FILE NOW: FILING FEE IS \$61.25

FILED

Apr 02 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N48219 (2)
1. Corporation Name
ROYAL GARDEN ESTATES HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business 6904 CORTEZ ROAD BRADENTON FL 34209 US	Mailing Address 6904 CORTEZ ROAD LOT 228 BRADENTON FL 34209-6537 US
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2. Principal Place of Business	2a. Mailing Address
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21 6904 Cortez Rd. W.	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.

22	27
City & State	City & State

23 BRADENTON FL.	28
Zip	Zip

24 34209	25 MANATEE	29	30
Country	Country		

3. Date Incorporated or Qualified 04/06/1992	3a. Date of Last Report 04/18/1996
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4. FEI Number 13-1383630	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 _____ (NOTE: Registered Agent signature required when re-listing) DATE _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	WILLIAMS, MARY	
STREET ADDRESS	6904 CORTEZ RD, LOT 228	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	WILLIAMS, ARNOLD	
STREET ADDRESS	6904 CORTEZ RD LOT #228	
CITY-ST-ZIP	BRADENTON FL 34209	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	HAINES, NORMAN	
STREET ADDRESS	6904 CORTEZ RD, LOT 66	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BECHTEL, GERTRUDE	
STREET ADDRESS	6904 CORTEZ RD, LOT 187	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HENNESSEY, MARGARET	
STREET ADDRESS	6904 CORTEZ RD, LOT 192	
CITY-ST-ZIP	BRADENTON FL	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	THORNBY, KITTY	
STREET ADDRESS	6904 CORTEZ RD, LOT 100	
CITY-ST-ZIP	BRADENTON FL	

1.1 TITLE	PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	ROBERT GEBERNITZ	
1.3 STREET ADDRESS	6904 CORTEZ RD # 73	
1.4 CITY-ST-ZIP	BRADENTON, FL. 34209	
2.1 TITLE	1ST. V.P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	JIM BROOMFIELD	
2.3 STREET ADDRESS	6904 CORTEZ RD. LOT 79	
2.4 CITY-ST-ZIP	BRADENTON, FL. 34209	
3.1 TITLE	SEC.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	AGNES BESTING	
3.3 STREET ADDRESS	6904 CORTEZ RD LOT # 11	
3.4 CITY-ST-ZIP	BRADENTON, FL. 34209	
4.1 TITLE	TRES.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	MARY FOX	
4.3 STREET ADDRESS	6904 CORTEZ RD. W # 160	
4.4 CITY-ST-ZIP	BRADENTON, FL. 34209	
5.1 TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	BILL SMOTHERS	
5.3 STREET ADDRESS	6904 CORTEZ RD. W # 11	
5.4 CITY-ST-ZIP	BRADENTON FL. 34209	
6.1 TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	DICK ALEXANDER	
6.3 STREET ADDRESS	6904 CORTEZ RD. W. #174	
6.4 CITY-ST-ZIP	BRADENTON FL. 34209	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

CR2E037 (9/96)