

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 17, 2006 8:00 am**  
**Secretary of State**

04-17-2006 90343 024 \*\*\*\*61.25

**DOCUMENT # N50104**

1. Entity Name

RESIDENT COUNCIL OF ROYAL PALM TOWERS, INC.



Principal Place of Business

ROYAL PALM TOWERS APTS.  
2424 EDWARDS DRIVE, APT. 601  
FT. MYERS FL 33901  
US

Mailing Address

ROYAL PALM TOWERS APTS.  
2424 EDWARDS DRIVE, APT. 601  
FT. MYERS FL 33901  
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOGG, DOUGLAS A  
ROYAL PALM TOWERS  
2424 EDWARDS DRIVE #601  
FT MYERS FL 33901

Name

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

City

FL

Zip Code

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

*Douglas Hogg*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3-13-06

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$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 P ☐ Delete  
NAME HOGG, DOUGLAS  
STREET ADDRESS 2424 EDWARDS DR, #601  
CITY-ST-ZIP FORT MYERS FL 33901

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☒ Delete  
NAME SUMNER, PATTIE  
STREET ADDRESS 2424 EDWARDS DR. # 301  
CITY-ST-ZIP FT. MYERS FL 33901-2802

TITLE ☒ Change ☒ Addition  
NAME *JACK Sorber*  
STREET ADDRESS *2424 Edwards Dr*  
CITY-ST-ZIP *Fort Myers, Fla. 33901*

TITLE V ☐ Delete  
NAME FARELL, BILL  
STREET ADDRESS 2424 EDWARDS DR, #406  
CITY-ST-ZIP FORT MYERS FL 33901

TITLE ☒ Change ☒ Addition  
NAME *S Joy Wood*  
STREET ADDRESS *2424 Edwards Dr, 205*  
CITY-ST-ZIP *Fort Myers, FL 33901*

TITLE D ☒ Delete  
NAME SHAFFER, CAROL  
STREET ADDRESS 2424 EDWARDS DRIVE # 1110  
CITY-ST-ZIP FORT MYERS FL 33901

TITLE ☒ Change ☒ Addition  
NAME *T O Pal Smith*  
STREET ADDRESS *2424 Edwards Dr, 502*  
CITY-ST-ZIP *Fort Myers, FL 33901*

TITLE T ☒ Delete  
NAME SMITH, JANICE  
STREET ADDRESS 2424 EDWARDS DR, 1109  
CITY-ST-ZIP FT. MYERS FL 33901-2802

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME KING, SHARON L  
STREET ADDRESS 2424 EDWARDS DR 1101  
CITY-ST-ZIP FORT MYERS FL 33901

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Douglas Hogg* *Douglas Hogg*

3-13-06

(239)

464-3039