# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 14, 2009**
**Secretary of State**

DOCUMENT# N95000001953

**Entity Name:** ROYAL PALM CHAPTER AACA, INC.

**Current Principal Place of Business:**

255 ALLWORTHY STREET
PORT CHARLOTTE, FL 33954 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 380522
MURDOCK, FL 339380522 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CARR, DAROL H. M
2315 AARON STREET
PORT CHARLOTTE, FL 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: VP ( ) Delete
Name: RUSSELL, ROBERT R
Address: 33324 BILLINGS AVE
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: D ( ) Delete
Name: LITWINAS, RICHARD
Address: 445 GILLOT BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: D ( ) Delete
Name: SIMCO, PHILIP
Address: 3301 ARECA STREET
City-St-Zip: PUNTA GORDA, FL 33950

Title: D ( ) Delete
Name: WAGLEY, HENRY
Address: 112 COUSLEY DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D ( ) Delete
Name: SELLECK, DAN
Address: P.O BOX 510092
City-St-Zip: PUNTA GORDA, FL 33951

Title: P ( ) Delete
Name: ELLSWORTH, RICHARD
Address: 255 ALLWORTHY ST
City-St-Zip: PORT CHARLOTTE, FL 33954

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition
Name: WAGLEY, RUTH
Address: 112 COUSLEY DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33952

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

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

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: RICHARD ELLSWORTH PRES 04/14/2009
Electronic Signature of Signing Officer or Director Date