## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000004067

FILED Feb 22, 2012 Secretary of State

Entity Name: ROYAL PINES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

MAY MGT. 475 W TOWN PLACE

475 W TOWN PLACE SUITE 112 SUITE 112

SAINT AUGUSTINE, FL 32092 US SAINT AUGUSTINE, FL 32092 US

Current Mailing Address: New Mailing Address:

C/O MAY MGT 5455 A1A SOUTH

5455 A1A SOUTH SUITE 3

ST. AUGUSTINE, FL 32080 US ST AUGUSTINE, FL 32080 US

FEI Number: 59-3464427 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MAY MGMT. SVCS, INC.

MAY MGMT. SVCS, INC.

5455 A1A S

MAY MGMT. SVCS, INC.

SAINT AUGUSTINE, FL 32080 US ST AUGUSTINE, FL 32080 US

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: 02/22/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

Name: JARVIS, RICK Address: 5455 A1A S

City-St-Zip: ST AUGUSTINE, FL 32080

Title: VP

Name: QUINET, KAREN Address: 5455 A1A S

City-St-Zip: ST AUGUSTINE, FL 32080

Title: T

Name: FUCHS, KENNETH Address: 5455 A1A S

City-St-Zip: ST AUGUSTINE, FL 32080

Title: D

Name: ENOS, CAROL Address: 5455 A1A S

City-St-Zip: ST AUGUSTINE, FL 32080

Title: [

Name: SMITH, PETER Address: 5455 A1A S

City-St-Zip: ST AUGUSTINE, FL 32080

I hereby 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 all other like empowered.

SIGNATURE: RICK JARVIS P 02/22/2012