2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004260

FILED Apr 09, 2009 Secretary of State

Entity Name: ROYAL PALM GOLF ESTATES HOMEOWNERS' ASSOCIATION, INC.

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

KRAMER TRIAD MGMT 3050 N HORSESHOE DR

3050 HORSHOE DR NORTH N #275 STE 275

NAPLES, FL 34104 NAPLES, FL 34104

Current Mailing Address: New Mailing Address:

KRAMER TRIAD MGMT 3050 N HORSESHOE DR

3050 HORSHOE DR NORTH N #275 STE 275

NAPLES, FL 34104 NAPLES, FL 34104

FEI Number: 59-3514643 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:

 ZEDECK, LEONARD E
 VANDALL, BONITA D

 13790 NW 4TH ST
 3050 N HORSESHOE DR

 STE 113
 STE 275

 SUNRISE, FL 33325 US
 NAPLES, FL 34104 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: BONITA VANDALL 04/09/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

NAPLES, FL 34114

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: DP (X) Change () Addition Name: BLOOM, ASHLEY BLOOM, ASHLEY

 Name:
 BLOOM, ASHLEY
 Name:
 BLOOM, ASHLEY

 Address:
 1551 HANSON STREET
 Address:
 1551 HANSON STREET

 City-St-Zip:
 SARASOTA, FL 34231
 City-St-Zip:
 SARASOTA, FL 34231

Title: D () Delete Title: DT (X) Change () Addition

Name: GROSS, LEONARD Name: LEPP, JIM

Address: 13050 BRIDGEFORD AVE Address: 18481 ROYAL HAMMOCK BLVD

City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: NAPLES, FL 34114

Title: D () Delete Title: () Change () Addition

 Name:
 BLOOM, HOWARD
 Name:

 Address:
 4281 LIVE OAK BLVD.
 Address:

 City-St-Zip:
 DELRAY BEACH, FL 33445
 City-St-Zip:

 $\label{eq:title:DVP} {\sf Title:} \qquad {\sf DVP} \qquad {\sf (X) Change () Addition}$

 Name:
 NOLAN, LEONARD
 Name:
 GROSS, LEONARD

 Address:
 18030 BLUEWATER RD
 Address:
 0

 City-St-Zip:
 NAPLES, FL 34114
 City-St-Zip:
 NAPLES, FL 34114

Title: D (X) Delete Title: () Change () Addition

Name: HUTSON, MICHAEL Name:
Address: 18397 ROYAL HAMMOCK BLVD Address:

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.

City-St-Zip:

SIGNATURE: ASHLEY BLOOM PRES 04/09/2009

Electronic Signature of Signing Officer or Director

Date