2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2010
Secretary of State

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Entity Name: THE ROYAL PALM HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O MIAMI MANAGEMENT, INC
1145 SAWGRASS CORP PKWY
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

C/O MIAMI MANAGEMENT, INC
1145 SAWGRASS CORP PKWY
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 65-0933397 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KATZMAN GARFINKEL, P.A.
1501 N.W. 49TH ST.
SUITE 202
FT. LAUDERDALE, FL 33309 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: D
Name: BERKES, PETER
Address: 1145 SAWGRASS CORP PKWYNC
City-St-Zip: SUNRISE, FL 33323

Title: VP
Name: WESSLER, PEGGY
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

Title: TD
Name: LAZARUS, LES
Address: 1145 SAWGRASS CORP PKWYCLE
City-St-Zip: SUNRISE, FL 33323

Title: PD
Name: LIPSON, DAVID
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

Title: S
Name: HOBBS, DIONNE
Address: 1145 SAWGRASS CORPORATE PARKWAY
City-St-Zip: SUNRISE, FL 33323

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: DAVID LIPSON PD 03/30/2010
Electronic Signature of Signing Officer or Director — Date