

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2002 8:00 am
Secretary of State
 03-06-2002 90098 019 ***150.00

DOCUMENT # P00000099281

1. Entity Name
ROYAL SHORES, INC.

Principal Place of Business Mailing Address
11065 STONE CREEK ST **11065 STONE CREEK ST**
WELLINGTON FL 33467 **WELLINGTON FL 33467**
US **US**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

6. Name and Address of Current Registered Agent

BUCKLEY, RITA C
11065 STONE CREEK ST
WELLINGTON FL 33467

Name
 Street Address
 City

8. The above named entity submits this statement for the purpose of changing its registered office

SIGNATURE *Rita C Dorr*
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent sign

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$15
After May 1, 2002 Fee will be
Make Check Payable to Department

DO May Be
ed to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **BUCKLEY, RITA C**
 STREET ADDRESS **11065 STONE CREEK STREET**
 CITY-ST-ZIP **WELLINGTON FL 33467**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME **DORR, RITA C**
 STREET ADDRESS **11065 Stone Creek St** **(P)**
 CITY-ST-ZIP **Wellington FL 33467**

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

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *RITA C DORR*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **02/20/02** (561) 791-0781
 Daytime Phone #

*Name change
 due to
 marriage -
 See license
 attached*

CR2E034 (9/01)

**This license not valid unless seal of Clerk,
Circuit or County Court, appears thereon.**

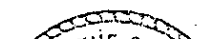
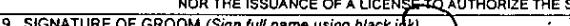


330032

Apr-12-2001 08:28am 01-139624
ORB 12452 Pg 1980
DOROTHY H. WILKEN, CLERK PB COUNTY, FL

APPLICATION TO MARRY



APPLICATION TO MARRY			
1. GROOM'S NAME (First, Middle, Last) CHRISTOPHER LOUIS DORR		2. DATE OF BIRTH (Month, Day, Year) MAY 01 1960	
3a. RESIDENCE - CITY, TOWN, OR LOCATION WELLINGTON	3b. COUNTY PALM BCH	3c. STATE FL	4. BIRTHPLACE (State or Foreign Country) MICHIGAN
5a. BRIDE'S NAME (First, Middle, Last) KATH SILVIA BUCKLEY		5b. MAIDEN SURNAME (If different) CAMARDELLA	6. DATE OF BIRTH (Month, Day, Year) AUG 25 1966
7a. RESIDENCE - CITY, TOWN, OR LOCATION WELLINGTON	7b. COUNTY PALM BEACH	7c. STATE FL	8. BIRTHPLACE (State or Foreign Country) NEW YORK

WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.

	9. SIGNATURE OF GROOM (Sign full name using black ink)	10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE)
		MAR 23 2001
	11. TITLE OF OFFICIAL DEPUTY CLERK	12. SIGNATURE OF OFFICIAL (Use black ink)
	13. SIGNATURE OF BRIDE (Sign full name using black ink)	14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE)
		MAR 23 2001
	15. TITLE OF OFFICIAL DEPUTY CLERK	16. SIGNATURE OF OFFICIAL (Use black ink)
		

LICENSE TO MARRY

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

<p align="center">LICENSE TO MARRY</p> <p align="center">AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.</p>			
COUNTY ISSUING LICENSE	18. DATE LICENSE ISSUED	18a. DATE LICENSE EFFECTIVE	19. EXPIRATION DATE
PALM BEACH	MAR 23 2001	MAR 23 2001	MAY 22 2001
22a. SIGNATURE OF COURT CLERK OR JUDGE		20b. TITLE	20c. BY D.C.
		CLERK OF THE CIRCUIT	

CERTIFICATE OF MARRIAGE

I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA

21. DATE OF MARRIAGE (Month, Day, Year) 4/7/01	22. CITY, TOWN OR LOCATION OF MARRIAGE Wellington
23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink) W. J. Dockerill	23c. ADDRESS (Of person performing ceremony) 13645 Paddock Dr
23b. NAME AND TITLE OF PERSON PERFORMING CEREMONY (Or notary stamp) W. J. Dockerill - Pastor	24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) Linda Yokota
	25. SIGNATURE OF WITNESS TO CEREMONY (Use black ink) Gregory S. Butzina GREGORY BUTZINA

INFORMATION BELOW FOR USE BY VITAL STATISTICS ONLY - NOT TO BE RECORDED