

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2005 8:00 am
Secretary of State

05-06-2005 90100 029 ***150.00

DOCUMENT # P02000066461

1. Entity Name
ROYAL POOL MANAGEMENT INC.



Principal Place of Business
**6309 ROSE FINCH COURT
#102
LAKEWOOD RANCH, FL 34202**

Mailing Address
**6309 ROSE FINCH COURT
#102
LAKEWOOD RANCH, FL 34202**

50050272



2. Principal Place of Business
12011 WINDING WOODS WAY

3. Mailing Address
12011 WINDING WOODS WAY

Suite, Apt. #, etc.

01242005 Chg-P CR2E034 (10/03)

City & State
BRADENTON FL

Zip
34202

Country
USA

4. FEI Number
04-3676691

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**RAFANIELLO, VANESSA
6309 ROSE FINCH COURT #102
BRADENTON, FL 34202**

7. Name and Address of New Registered Agent
Name
VANESSA RAFANIELLO
Street Address (P.O. Box Number is Not Acceptable)
12011 WINDING WOODS WAY
City
BRADENTON FL Zip Code
34202

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RAFANIELLO, MICHAEL P 6309 ROSE FINCH COURT #102 BRADENTON, FL 34202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12011 WINDING WOODS WAY BRADENTON FL 34202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RAFANIELLO, VANESSA 6309 ROSE FINCH COURT #102 BRADENTON, FL 34202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12011 WINDING WOODS WAY BRADENTON FL 34202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FARA, ANNUNZIATA 6309 ROSE FINCH COURT #102 BRADENTON, FL 34202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12011 WINDING WOODS WAY BRADENTON FL 34202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CELATI, DINO 6309 ROSE FINCH COURT #102 BRADENTON, FL 34202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12011 WINDING WOODS WAY BRADENTON FL 34202
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Vanessa Rafaniello* **VANESSA RAFANIELLO**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **PRESIDENT** Date _____ Daytime Phone # _____