2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2005 8:00 am Secretary of State 05-04-2005 90180 046 ***150.00

DOCUMENT # P0400008783 1. Entity Name ROYALTY POOL BUILDERS INC						05-04-2005 90180 046 ***150.00					
Principal Place 780 94TH AV NAPLES, FL	/enue n	Mailing Address 780 94TH AVENUE N NAPLES, FL 34108				50048105					
2. Principal Pl	lace of Business SF SW	3. Mailing Address 136 136 SL SW			ر						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				03112005	Chg-P	CR2E	34 (10/03)		
<u> </u>	ES, P1.	City & State	NAPLES			4. FEI Numbe	55727	57	No	plied For t Applicable	
^{Zip} 4//	Country OSA	34//7	J.	51			of Status Desired	Registered	\$8.75 Add Fee Required		
6. Name and Address of Current Registered Agent Na						7. Name and Address of New Registered Agent me Denny Sanchez					
SANCHEZ, DENNY 780 94TH AVENUE N NAPLES, FL 34108					Street Address (P.O. Bes Number is NTA ceptado						
					•	oles		FL		7117	
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 Signature speed of printed name of registered agent and title if applicable. (NOTE: Registered Agent eignature required when reinstating) UNITE: Registered Agent eignature required when reinstating)											
FILE NOW!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. 9. Election Campaign Financing Added to Fees											
10. TITLE	OFFICERS ANI	D DIRECTORS Delete	11.	<u> </u>	D		CHANGES TO OF		O DIRECTORS Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	SANCHEZ, DENNY 780 94TH AVENUE N NAPLES, FL 34108			ie Eet address '-st-zip	5A 780 Na	nchez 941 iples,	Denny FAUE F1. 344	() o .			
TITLE NAME STREET ADDRESS CTTY-ST-ZIP		☐ Delete			_			-	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete ·		L L	<u> </u>				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete							☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						-	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	cm	ae Eet address Y-st-zip					☐ Change	☐ Addition	
12. I hereby certify that the information supplied with this filling 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 fectiver 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 it changed, or on an attactment with an address, with all other like empowered.											