

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000142413

FILED
May 25, 2007
Secretary of State

Entity Name: MOUNT ROYAL FAMILY INVESTMENTS, INC.

Current Principal Place of Business:

136 WILLIAM BARTRAM DRIVE
WELAKA, FL 32193

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 297
WELAKA, FL 32193

New Mailing Address:

P. O. BOX 1100
WELAKA, FL 32193

FEI Number: 20-3691175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKEL, EDWARD C
1 INDEPENDENT DRIVE
SUITE 2301
JACKSONVILLE, FL 32202 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ANDERSON, MARY ANN
Address: 3929 CHEROKEE VILLA LANE
City-St-Zip: JACKSONVILLE, FL 32277

Title: D () Delete
Name: WILCOX, BILL
Address: 7512 COLONY COVE LANE
City-St-Zip: JACKSONVILLE, FL 32277

Title: D () Delete
Name: WILLIS, CAROLINE
Address: 1242 LITTLE OAK CIRCLE
City-St-Zip: TITUSVILLE, FL 32780

Title: D () Delete
Name: WILCOX, DAVID
Address: 1415 MACKERAL DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D () Delete
Name: BUTLER, MELINDA
Address: 2533 SUNNY CREEK DRIVE
City-St-Zip: ORANGE PARK, FL 32003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WILCOX, DAVID
Address: 1630 YATES DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY ANN ANDERSON

D

05/25/2007

Electronic Signature of Signing Officer or Director

Date