

JUL 17 '97 06:53AM PYRAMID CONST FROMM & CO., PC
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Jul 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra M. Northam Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P95000028670 (4) ROYAL PALM BUILDERS II, INC.		
Principal Place of Business 5911 PELICAN BAY BLVD. SUITE 200 NAPLES FL 33909		Mailing Address 275 NORTH FRANKLIN TURNPIKE RALEIGH NJ 07068-2175

2. Date Incorporated or Qualified 06/07/1995 3. Date of Last Report 06/18/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number 05-0572848	Applied For Not Applicable
21. Suite, Apt. #, etc.	2a. Suite, Apt. #, etc.	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
22. City & State	27. City & State	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fee
23. Zip	28. Zip	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	
24. Country	29. Country		

8. Name and Address of Current Registered Agent LAWSON, LINDA A 800 80TH AVE, NORTH NAPLES FL 33963		10. Name and Address of New Registered Agent	
81. Name	82. Street Address (P.O. Box Number is Not Acceptable)	83. City	84. Zip Code

11. Pursuant to the provisions of Sections 607.0503 and 607.1501, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent; I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE _____ (Signature, typed or printed name of registered agent and title if applicable) _____ (Typed Name) _____ (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	Change ☐ Addition ☐
STREET ADDRESS	COLEMAN, STEPHEN D	1.2 NAME	
CITY-ST-ZIP	8000 NORTH TAMMAM TRAIL, SUITE 2270	1.3 STREET ADDRESS	
	NAPLES FL 33963	1.4 CITY-ST-ZIP	
TITLE	NAME	2.1 TITLE	Change ☐ Addition ☐
STREET ADDRESS		2.2 NAME	
CITY-ST-ZIP		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
TITLE	NAME	3.1 TITLE	Change ☐ Addition ☐
STREET ADDRESS		3.2 NAME	
CITY-ST-ZIP		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
TITLE	NAME	4.1 TITLE	Change ☐ Addition ☐
STREET ADDRESS		4.2 NAME	
CITY-ST-ZIP		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
TITLE	NAME	5.1 TITLE	Change ☐ Addition ☐
STREET ADDRESS		5.2 NAME	
CITY-ST-ZIP		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
TITLE	NAME	6.1 TITLE	Change ☐ Addition ☐
STREET ADDRESS		6.2 NAME	
CITY-ST-ZIP		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 of this report, or on an assignment with an address.

SIGNATURE: _____ SIGNATURE RECEIVED: _____ TOTAL P. 82