## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P96000103789 (9)

ROYAL PALM ASSOCIATES, INC.

Principal Place of Business

Mailing Address

5904 POINTE WEST BLVD BRADENTON FL 34209

5904 POINTE WEST BLVD BRADENTON FL 34209-5521

## FILED Jun 10 1997 8:00am Secretary of State



BRADENTON FL	L 34209	BRADENTON FL 34209-5529			
,				3. Date Incorporated or Qualified 12/27/1996	3a. Date of Last Report
	ace of Business	2a. Mailing Address	Λ	4. FEI Number	Applied For
21 ROVAL	HLM ASSOCIATES FINC	26 ROYAL PALM	HELOCIATER:	w 65-0/003:	Not Applicable
22 60 7- 4	653 LOWST. E.	27 P.O. BOX 7.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 PALM	ETTO, FLA	City & State  28 OCADENTOA	) FLA.	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip //a	Country	Zip	*Country	8. This corporation has liability for in	
24 9 Ya	25	29 342/0 30	)		Yes No
	9. Name and Address of Current i	legistered Agent	24 1	10. Name and Address of New Reg	jistered Agent
	LEY, ROGER P		81 Name		
	MANATEE AVENUE WEST		82 Street Add	dress (P.O. Box Number is Not Acceptable	(e)
BRAD	DENTON FL 34205				
			[83]		
. *			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607,0502 a	and 607,1508, Florida Statutes,	the above-named co	rporation submits this statement for the pu	
office or re agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was authors of, Section 607.0505, Florid	horized by the corporate. It also by the corporate is a statute of the corporate of the cor	rporation submits this statement for the pu ation's board of directors. I hereby accept	t the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agon!		egislered Agent signature req		DATE
12,	OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	D OFFICERO AND C	DELETE	117(I)E	2	Change X Addition
NAME	PALOMINO, CELESTINO		1.2 NAME	VANCY PALOMINO	)
	5904 POINTE WEST BLVD		1.3 STREET ADDRESS	4203 BAMBOD TE	TR
STREET ADDRESS	BRADENTON FL 34209		1.3 STREET ADDRESS	PARENTAL ELA	2/12/18-13/1/
CITY-ST-ZIP TITLE	DIVIDENTON PL 34208	☐ DELETE	14 CITY-ST-ZIP	BRADENTON, FLA 3	Change Addition
1				and a military and services	
NAME		,	2.2 NAME	PALOMINO CELEG FROS BAMBOO BRADENTON, FLAS	TEO
STREET ADDRESS			2.3 STREET ADDRESS	PAOS BHIMBOD	AR,
CITY-ST-ZIP		☐ DELETE	2.4 CITY-S1-ZIP	BRHDENTON, FLH 3	Change Addition
TITLE		L DELETE	3.1 TITLE		L.] Change L.] Addition
NAME			3.2 NAME		
STREET ADDRESS		1	3.3 STREET ADDRESS		
CITY-ST-ZIP		DOLONG	3 4. CITY-ST-ZIP		
TITLE		DELETE.	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME		ļ	5 2 NAME		ľ
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME .			6.2 NAME		
STREET ADORESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	by certify that the information supplied v	with this filing does not qualify to		ed in Section 119.07(3)(i), Florida Statutes	. I further certify that the

4. I do nereby 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 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 if changed, or on an attachment with an address.

SIGNATURE: 128/97 (941) 795-0354