


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90092 036 ***150.00

DOCUMENT # P96000103789					
1. Entity Name ROYAL PALM ASSOCIATES, INC.					
Principal Place of Business 327-653 10TH ST E PALMETTO, FL 34221 US			Mailing Address P.O. BOX 14544 BRADENTON, FL 34280-4544 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0723366	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CONLEY, ROGER P 2401 MANATEE AVENUE WEST BRADENTON, FL 34205			7. Name and Address of New Registered Agent Name <u>NANCY PALOMINO</u> Street Address (P.O. Box Number is Not Acceptable) <u>4203 BAMBOO TER.</u> City <u>BRADENTON</u> FL Zip Code <u>34210</u>		
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 <u>Nancy Palomino</u> <u>NANCY PALOMINO</u> <u>4-27-07</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	D PALOMINO, CELESTINO 4203 BAMBOO TER BRADENTON, FL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PALOMINO, NANCY 4203 BAMBOO TER BRADENTON, FL	<input type="checkbox"/> Delete			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Nancy Palomino</u> <u>NANCY PALOMINO</u> <u>4-27-07</u> <u>(941) 795-1357</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		