

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2001 8:00 am
Secretary of State

03-15-2001 90011 029 ***150.00

DOCUMENT # P97000071205

1. Entity Name
ROYAL PROPERTY DEVELOPMENT CORP.

Principal Place of Business 321 SOUTHEAST 15 AVENUE FORT LAUDERDALE FL 33301	Mailing Address 321 SOUTHEAST 15 AVENUE FORT LAUDERDALE FL 33301
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2. Principal Place of Business 527 Royal Plaza Drive	3. Mailing Address 341 Royal Plaza Dr
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Ft. Lauderdale	City & State Ft. Lauderdale
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Zip 33301	Country	Zip 33301	Country
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4. FEI Number **65-0809131** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MURRAY, DAVID G ESQ
321 SOUTHEAST 15 AVENUE
FORT LAUDERDALE FL 33301

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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.

SIGNATURE *J. Chillingworth* **10 MARCH 2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHILLINGWORTH, JOHN FRANCIS 424 CORAL WY FT LAUDERDALE FL 33301	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHILLINGWORTH 341 ROYAL PLAZA DR FT. LAUDERDALE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COPPEN, ALLAN 341 ROYAL PLAZA DRIVE FORT LAUDERDALE FL 33301	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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13. I hereby 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *J. Chillingworth* **10 MARCH 2001**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)