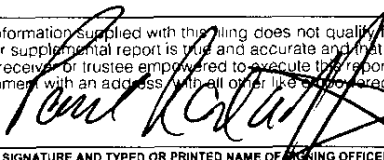


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 29, 2008 08:00 AM
Secretary of State

DOCUMENT # P99000049407			
1. Entity Name ROYAL GULF PROPERTIES, INC.			
Principal Place of Business 2100 TRADE CENTER WAY STE D NAPLES, FL 34109		Mailing Address 2100 TRADE CENTER WAY STE D NAPLES, FL 34109	
DO NOT WRITE IN THIS SPACE			
		01172008 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-3598163	Applied For ☐ Not Applicable
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SKRIVAN, KENT A ESQ 801 LAUREL OAK DR, STE 705 NAPLES, FL 34108		DO NOT WRITE IN THIS SPACE	
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 _____ Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when terminating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	000000931396 05/22/08-80013-008 150.00
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DP RADCLIFFE, PAUL 160 KIRTLAND DR NAPLES, FL 34110		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DV MUSUMANO, PATSY 2100 TRADE CENTER WAY, STE D NAPLES, FL 34109		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DVST MUSUMANO, DONNA 2100 TRADE CENTER WAY, STE D NAPLES, FL 34109		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DV MUSUMANO, JEFF 2100 TRADE CENTER WAY, STE D NAPLES, FL 34109		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DV MUSUMANO, GREG 2100 TRADE CENTER WAY, STE D NAPLES, FL 34109		
TITLE NAME STREET ADDRESS CITY- ST- ZIP			
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 signatures.			
SIGNATURE: 		Paul Radcliffe	4/5/08 825-6956
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR		Date	Daytime Phone #