

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000001469

**FILED**  
**Jan 25, 2016**  
**Secretary of State**  
**CC0095932974**

**Entity Name:** ROYAL PALM PUD RESIDENTS' ASSOCIATION, INC.

**Current Principal Place of Business:**

6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809

**Current Mailing Address:**

6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809 US

**FEI Number: 42-1529998**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LELAND MANAGEMENT INC  
6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809 US

*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: REBECCA FURLOW**

**01/25/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            MEEHL, JOHN  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title            VP, DIRECTOR  
Name            BUBBS, SUSAN  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title            TREASURER, DIRECTOR  
Name            HOBSON, ROBERT  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title            SECRETARY, DIRECTOR  
Name            KESTLER, FRED  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title            DIRECTOR  
Name            JOSKEN, JAN  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title            DIRECTOR  
Name            LAWLOR, JILL  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title            DIRECTOR  
Name            RINALDI, MICHAEL  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: JOHN MEEHL**

**PD**

**01/25/2016**

Electronic Signature of Signing Officer/Director Detail

Date