

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morlham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 703857 (3)
1. Corporation Name
MONTICELLO INC



Principal Place of Business Mailing Address
RYBICKI, DOROTHY
3110 N E 29TH ST
FT. LAUDERDALE FL 33308

3. Date Incorporated or Qualified **04/09/1962** 3a. Date of Last Report **03/22/1995**

2. Principal Place of Business
21. **MONTICELLO INC**
22. **3110 N.E. 29TH ST, #13**
23. **FT. LAUDERDALE**
24. **33308**
25. **FLORIDA**
26. **3110 N.E. 29TH ST**
27. **FT. LAUDERDALE**
28. **FLORIDA**
29. **33308**
30. **FLORIDA**

4. FEI Number **59-1283364**
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
RYBICKI, DOROTHY A.
3110 NE 29TH ST
FORT LAUDERDALE FL 33308
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code **FL**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Dorothy A. Rybicki* DATE **4-6-96**

12. OFFICERS AND DIRECTORS		13. DIRECTORIAL ACTIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VT	11 TITLE	DR. WILLIAM C. QUAYSON
NAME	CELINO, ELEANOR	12 NAME	
STREET ADDRESS	3110 NE 29TH ST	13 STREET ADDRESS	3110 N.E. 29TH ST # 3
CITY - ST - ZIP	FT LAUDERDALE, FL 00000	14 CITY - ST - ZIP	FT LAUDERDALE, FL 33308
TITLE	T	21 TITLE	
NAME	RYBICKI, D	22 NAME	
STREET ADDRESS	3110 NE 29TH ST	23 STREET ADDRESS	
CITY - ST - ZIP	FT LAUDERDALE, FL 00000	24 CITY - ST - ZIP	
TITLE	SD	31 TITLE	
NAME	ANNA P. SMITH	32 NAME	
STREET ADDRESS	3110 N.E. 29TH STREET	33 STREET ADDRESS	
CITY - ST - ZIP	FT LAUDERDALE, FL 00000	34 CITY - ST - ZIP	
TITLE	PD	41 TITLE	
NAME	SMITH, L. A.	42 NAME	
STREET ADDRESS	3110 NE 29TH ST	43 STREET ADDRESS	
CITY - ST - ZIP	FT LAUDERDALE, FL 00000	44 CITY - ST - ZIP	
TITLE	VD	51 TITLE	
NAME	ECK, J.	52 NAME	
STREET ADDRESS	3110 NE 29TH ST	53 STREET ADDRESS	
CITY - ST - ZIP	FT LAUDERDALE, FL 00000	54 CITY - ST - ZIP	
TITLE	VD	61 TITLE	
NAME	CONCO, J.	62 NAME	
STREET ADDRESS	3110 NE 29TH ST	63 STREET ADDRESS	
CITY - ST - ZIP	FT LAUDERDALE, FL 00000	64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Dorothy A. Rybicki, TREAS* DATE: **4-6-96** DAYTIME PHONE: **954-564-3009**

CR2E037 (12/95)