


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005 8:00 am
Secretary of State

02-14-2005 90040 006 ****70.00

DOCUMENT # 707254			
1. Entity Name MONROE ARMS INC			
Principal Place of Business 1833 MONROE ST., #9 HOLLYWOOD, FL 33020		Mailing Address 5800 MARGATE BLVD STE 414 MARGATE, FL 33063	
2. Principal Place of Business <i>Same</i>		3. Mailing Address <i>109 Leamy St</i>	
Suite, Apt. #, etc. <i># 8</i>		Suite, Apt. #, etc.	
City & State		City & State <i>Gardner, MA</i>	
Zip	Country	Zip <i>01440</i>	Country <i>U.S.A</i>
4. FEI Number 59-2606722		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
AUGUSTINE, LEONORA 1833 MONROE ST 14 HOLLYWOOD, FL 33020		Name <i>Same</i>	
		Street Address (P.O. Box Number is Not Acceptable) <i>Apt # 10</i>	
		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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BIEGAS, KATHLEEN 1833 MONROE ST., #21 HOLLYWOOD, FL 33020 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CROSBIE, NOREEN 1833 MONROE STREET HOLLYWOOD, FL 33020 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>D</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>Apt # 4</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALLERANI, EDWARD 1833 MONROE ST HOLLYWOOD, FL 33020 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>S</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <i>Gallerani, Irene</i> <i>1833 Monroe St Apt # 5</i> <i>Hollywood, FL 33020</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NIX, JEANINE DR. 1833 MONROE ST., #1 HOLLYWOOD, FL 33020 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T AUGUSTINE, LEONORA 1833 MONROE ST HOLLYWOOD, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>VP</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>Apt # 10</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BOURGEOIS, VIRGINIA 1833 MONROE ST., #8 HOLLYWOOD, FL 33020 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>PD / T</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 617, 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: <i>Virginia Bourgeois</i>		<i>Virginia Bourgeois</i> <i>2/11/05</i> <i>954-923-1835</i>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	
<i>978-632-3404</i>			