2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000067

FILED Feb 16, 2009 Secretary of State

Entity Name: MONTERREY CONDOMINIUM ASSOCIATION, INC.

Surrent I	Principal Place	of Business:	New Principal Plac	ee of Business:
	E MARCO DR ISLAND, FL 34°	145		
Current Mailing Address:			New Mailing Address:	
	E MARCO DR SLAND, FL 34	145		
El Numbe	r: 65-0633958	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name an	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
5405 PAF NAPLES, The abov		T S	purpose of changing its registe	red office or registered agent, or both,
	te of Florida.			
SIGNATU	JRE:			
	Flootron	in Cianatura of Dagistarad Ag	ant	Data
		ic Signature of Registered Ag		Date
	Electron			Date GES TO OFFICERS AND DIRECTOR
	P () BROUSIL, JAM 980 CAPE MAR	TORS: Delete ES CO DR. #502		
DFFICEF itle: lame: .ddress: city-St-Zip: itle: lame: .ddress:	P () BROUSIL, JAM 980 CAPE MAR MARCO ISLANI T () BERGMANN, R 980 CAPE MAR	TORS: Delete ES CO DR. #502 D, FL 34145 Delete ICHARD CO DR #603	ADDITIONS/CHAN Title: Name: Address:	GES TO OFFICERS AND DIRECTOR
OFFICER itle: lame: \ddress:	P () BROUSIL, JAM 980 CAPE MAR MARCO ISLANI T () BERGMANN, R 980 CAPE MAR MARCO ISLANI S () BRETTHAUER, 980 CAPE MAR	Delete ES CO DR. #502 D, FL 34145 Delete CHARD CO DR #603 D, FL 34145 Delete NEIL CO DR., 707	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTOR () Change () Addition
DFFICEF itle: lame: .ddress: city-St-Zip: itle: lame: .ddress: city-St-Zip: itle: lame: .ddress:	P () BROUSIL, JAM 980 CAPE MAR MARCO ISLANI T () BERGMANN, R 980 CAPE MAR MARCO ISLANI S () BRETTHAUER, 980 CAPE MAR MARCO ISLANI D () DISANTO, LOU 980 CAPR MAR	Delete ES CO DR. #502 D, FL 34145 Delete ICHARD CO DR #603 D, FL 34145 Delete NEIL CO DR., 707 D, FL 34145 Delete IS CO DR., 1002	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: City-St-Zip:	GES TO OFFICERS AND DIRECTOR () Change () Addition () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JAMES BROUSIL P 02/16/2009