

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738017

Entity Name: MONACO G ASSOCIATION, INC.**Current Principal Place of Business:**SEACREST SERVICES INC
2101 CENTREPARK WEST DR STE 110
WEST PALM BEACH, FL 33409**Current Mailing Address:**SEACREST SERVICES INC
2101 CENTREPARK WEST DR STE 110
WEST PALM BEACH, FL 33409 US**FEI Number:** 59-1742372**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KAYE BENDER REMBAUM
1200 PARK CENTRAL BLVD S
POMPANO BEACH, FL 33064 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:** MICHAEL BENDER

03/07/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MOSES, CHARLES
Address SEACREST SERVICES INC
2101 CENTREPARK WEST DRIVE 110
City-State-Zip: WEST PALM BEACH FL 33409

Title VP
Name RINTOUL, BRYAN
Address SEACREST SERVICES INC
2101 CENTREPARK WEST DRIVE 110
City-State-Zip: WEST PALM BEACH FL 33409

Title TREASURER
Name TYBOR, DAVID
Address SEACREST SERVICES INC
2101 CENTREPARK WEST DRIVE 110
City-State-Zip: WEST PALM BEACH FL 33409

Title SECRETARY
Name SUTERA, THOMAS
Address SEACREST SERVICES INC
2101 CENTREPARK WEST DRIVE 110
City-State-Zip: WEST PALM BEACH FL 33409

Title DIRECTOR
Name BARCOFF, DAVID
Address SEACREST SERVICES INC
2101 CENTREPARK WEST DRIVE 110
City-State-Zip: WEST PALM BEACH FL 33409

Title DIRECTOR
Name GORIVODSKAYA, IZABELLA
Address SEACREST SERVICES INC
2101 CENTREPARK WEST DRIVE 110
City-State-Zip: WEST PALM BEACH FL 33409

Title DIRECTOR
Name STRYKER, BETTYANN
Address SEACREST SERVICES INC
2101 CENTREPARK WEST DRIVE 110
City-State-Zip: WEST PALM BEACH FL 33409

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: CHARLES MOSES

PRESIDENT

03/07/2022

Electronic Signature of Signing Officer/Director Detail

Date