#### 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.

PRESIDENT

#### SIGNATURE: LASZLO VARGA

Electronic Signature of Signing Officer/Director Detail

**Current Principal Place of Business:** 

**500 ALTERNATE 19 SOUTH** PALM HARBOR, FL 34683

REPORT

# **Current Mailing Address:**

**500 ALTERNATE 19 SOUTH** PALM HARBOR, FL 34683 US

# FEI Number: 59-2518772

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

2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

MONARCH ASSOCIATION MANAGEMENT **500 ALTERNATE 19 SOUTH** PALM HARBOR, FL 34683 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	: M. SUSAN MARINO, LCAM			09/01/2023
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	DIRECTOR	Title	SECRETARY	
Name	BARBOSA, PATRICIA	Name	KEPLER, TRACY	
Address	500 ALTERNATE 19 SOUTH	Address	500 ALTERNATE 19 SOUTH	
City-State-Zip:	PALM HARBOR FL 34683	City-State-Zip:	PALM HARBOR FL 34683	
Title	DIRECTOR	Title	PRESIDENT	
Name	JOHNSON, KARIN	Name	VARGA, LASZLO	
Address	500 ALTERNATE 19 SOUTH	Address	500 ALTERNATE 19 SOUTH	
City-State-Zip:	PALM HARBOR FL 34683	City-State-Zip:	PALM HARBOR FL 34683	

Certificate of Status Desired: No

09/01/2023

# FILED Sep 01, 2023 Secretary of State 3818740618CC

Date