

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 182173

Entity Name: MONTE CARLO INC

FILED
Apr 26, 2009
Secretary of State

Current Principal Place of Business:

212 W ESPANOLA WAY
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

212 W ESPANOLA WAY
MELBOURNE, FL 32901

New Mailing Address:

FEI Number: 59-6066478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, SHARON K
212 ESPANOLA WAY
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

MARTIN, SHARON K
212 W ESPANOLA WAY
MELBOURNE, FL 32901 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: SHARON K. MARTIN

04/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VDT () Delete
Name: MARTIN, SHARON K.
Address: 212 W. ESPANOLA WAY
City-St-Zip: MELBOURNE, FL 32901,

Title: PD () Delete
Name: MILLS, TIMOTHY A.
Address: 2326 BLUE SAPPHIRE CIR.
City-St-Zip: ORLANDO, FL 32837

Title: D () Delete
Name: MILLS, DANIEL C.
Address: 613 SEMINOLE AVE
City-St-Zip: LONGWOOD, FL 32570

Title: SD () Delete
Name: STOREY, NANCYK.
Address: 4308 DUNCOMBE DRIVE
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VDT (X) Change () Addition
Name: MARTIN, SHARON K
Address: 212 W. ESPANOLA WAY
City-St-Zip: MELBOURNE, FL 32901

Title: PD (X) Change () Addition
Name: MILLS, TIMOTHY A
Address: 2326 BLUE SAPPHIRE CIR.
City-St-Zip: ORLANDO, FL 32837

Title: D (X) Change () Addition
Name: MILLS, DANIEL C
Address: 613 SEMINOLE AVE
City-St-Zip: LONGWOOD, FL 32570

Title: SD (X) Change () Addition
Name: STOREY, NANCY K
Address: 4308 DUNCOMBE DRIVE
City-St-Zip: VALRICO, FL 33596

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARON K. MARTIN

VDT

04/26/2009

Electronic Signature of Signing Officer or Director

Date