## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## FILED Feb 14, 2007 08:00 Al **DOCUMENT # 710414** 1. Entity Name **Secretary of State** FATHER M. F. MONAHAN HOME ASSOCIATION, INC. Principal Place of Business Mailing Address 600 KNIGHTS ROAD 600 KNIGHTS ROAD HOLLYWOOD FL 33021-6145 HOLLYWOOD FL 33021-6145 2. Principal Place of Business - No P.O. Box # 3. Mailing Addross Suite, Apt. #, etc. Suite, Apt #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 59-1301291 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Cortificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MAGIC, ROBERT 925 NE 32 AVE Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33021 City 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 . Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS; CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE D ☐ Delete IIILE ☐ Change ☐ Addition NAME MARKEY, OWEN NAME U00000636366 STREET ADDRESS STREET ADDRESS 3410 GARFIELD ST 02/26/07-80013-025 61.25 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Addition Change HITE ☐ Delete THE NAME OLDZIEJ, GERARD S NAME STAFFT ADDRESS STREET ADDRESS 301 N.W. 97TH AVE. CITY-ST-7IP CITY-S1-ZIP PLANTATION FL 33324 TITLE ☐ Addition ☐ Delete THEE Change NAME NAME CONNORS, ROBERT M STREET ADDRESS STREET ADDRESS 4700 PIERCE ST. CITY-ST-ZIE CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Delete TITLE TITLE ☐ Addition ☐ Change NAME NAME MAGIC, R STREET ADDRESS STREET ADDRESS 925 N 32 AVE CITY-ST-ZIP CITY-SI-ZIP HOLLYWOOD FL 33021 TITLE ☐ Delete ☐ Addition TITLE Change NAME NAME ERMINE, J. STREET ADDRESS 4112 GARFIELD ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 Addition TITLE ☐ Delete ☐ Change TITLE. NAME CARDAMON, J. NAME STREET ADDRESS STREET ADDRESS 312 N 46 AVE CITY-ST-7IP HOLLYWOOD FL 33021 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and application and that my agriature shall have the same legal effect as if made under eath; 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 alternment with an address, with all other files empoyered.