

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711570

FILED
Jan 07, 2011
Secretary of State

Entity Name: MONROE ASSOCIATION FOR RETARDED CITIZENS, INC.

Current Principal Place of Business:

1401 SEMINARY
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 428
KEY WEST, FL 33041

New Mailing Address:

FEI Number: 59-1031546

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAM, SUSAN
2315 STAPLES
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

STANTON, MARK
1227 FLAGLER AVE
KEY WEST, FL 33040 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: MARK STANTON

01/07/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: GEDMIN, JANINE
Address: 1107 WINDSOR LANE
City-St-Zip: KEY WEST, FL 33041

Title: VD
Name: CLARK, JUDITH CITIZEN
Address: 1008 OLIVIA STREET
City-St-Zip: KEY WEST, FL 33041

Title: TD
Name: STANTON, MARK
Address: 1227 FLAGLER AVE
City-St-Zip: KEY WEST, FL 33040

Title: S
Name: CLARK, JUDITH
Address: 1008 OLIVIA STREET
City-St-Zip: KEY WEST, FL 33040

Title: D
Name: FLENARD, DIANA
Address: 6800 MALONEY AVE
City-St-Zip: KEY WEST, FL 33040

Title: S
Name: HINCHLIFFE, LINDA
Address: 109 KEY HAVEN ROAD
City-St-Zip: KEY WEST, FL 33040

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: DIANA FLENARD

D

01/07/2011

Electronic Signature of Signing Officer or Director

Date