

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2004 8:00 am
Secretary of State

02-19-2004 90033 003 ****70.00

DOCUMENT # 725682 1. Entity Name MONACO GARDEN CONDOMINIUM APARTMENTS, INC.					
Principal Place of Business 860 SE 6TH AVE. DEERFIELD, FL 33441				Mailing Address 860 SE 6TH AVE. DEERFIELD, FL 33441	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1577598	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
RYBERG, LINDA L 860 SE 6TH AVE. DEERFIELD, FL 33441			Name LINDA L. Kelly Street Address (P.O. Box Number is Not Applicable) 860 SE 6TH AVE #110 City DEERFIELD BEACH FL Zip Code 33441		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEAULIEU, JACQUES 860 S.E. 6TH AVE., #114 DEERFIELD BEACH, FL 33441 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/O ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RYBERG, LINDA 860 SE 6TH AVE., #108 DEERFIELD BEACH, FL 33441 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/VP LINDA L. Kelly 860 SE 6TH AV #110 Deerfield Beach, FL 33441 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPRISSLER, FERNE 860 SE 6TH AVE., #111 DEERFIELD BEACH, FL 33441 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NOV LE, CAROL 860 SE 6TH AVE., #312 DEERFIELD, FL 33441 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/S NOVILLE, CAROL ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Linda L. Kelly</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date 2/15/04 Daytime Phone # 954 466-4992					