2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT #725682

FILED Feb 28, 2007 8:00 am Secretary of State 02-28-2007 90010 029 ****61.25

MONACC	GARDE	N CONDOMINIUM	APARTMENTS, II	NC.							
Principal Place of Business 860 SE 6TH AVE. DEERFIELD, FL 33441 Mailing Address 860 SE 6TH AVE. DEERFIELD, FL 33441					<u>-</u>		40025	896			
Principal Place of Business - No P.O. Box #											
Suite, Apt. #, etc. Sui			Suite, Apt. #, etc.	Suite, Apt. #, etc.			02142007 Ch	ig-NP	CR2E0	37 (12/06)	
City & State			City & State	City & State			4. FEI Number Applied For 59-1577598 Not Applicable				
Zip		Country	Zip	Cou	intry		5. Certificate of Sta	atus Desired		\$8.75 Add	itional
	6. Name	and Address of Current I	Registered Agent				7. Name and Add	ress of New F	Registered	Agent	
TCHET III	NDA G				Name 7	Dia	Reba				
TCHET, LINDA G 860 SE 6TH AVE. #304						dress (F	P.O. Box Number is N	Not Acceptabl	e)		
DEERFIEL	.D, FL 334	141			860	0 :	5. E. 6th	AVE	# 30	3	
					City D.	eer	field Bed	ach	FL	Zip Cod	<u>"</u> /
8. The above	named entity	submits this statement for	the purpose of changing i	its registere					orida. I am		
=	tions of regist	ered agent.									
VY EA SIGNATURE .	sure	Rolm Dio	Rehail	10:0					2/23	2/07	
SIGNATURE .	Signature, typed	or printed name of registered agent a	and title it applicable. (Ne	OTE: Registere	d Agent signature	e required	when reinstating)		DATE	707	
Filing Fee is \$61.25 Due by May 1, 2007				9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees Make check payable to Florida Department of State				
	_							!			
10.	_		Trust Fund			A	Added to Fees DDITIONS/CHANG	Flo	rida Depa	rtment of S	tate
TITLE	PRES	OFFICERS AND DIF	Trust Fund	d Contribut	ion.	PR	Added to Fees DDITIONS/CHANG	Flo	rida Depa ERS AND D	rtment of S	tate
TITLE NAME	PRES HAHN, ED	OFFICERS AND DIF	Trust Fund	d Contribut 11. TITLE NAM	ion.	PR	Added to Fees DDITIONS/CHANG	Flo	rida Depa ERS AND D	rtment of S	tate
TITLE	PRES HAHN, EC 860 SE 61	OFFICERS AND DIF	Trust Fund	11. TITLE NAM STRE	E E E E E E E ADDRESS	PR Le	Added to Fees DDITIONS/CHANGI F 5 LapaK S.F. AVE	Floor	rida Depa ERS AND D	RECTORS IN Change	tate
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: All Jial Reba Dial SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR