NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 738773

1. Corporation Name

THE MONARCH CONDOMINIUM ASSOCIATION, INC.

							,	,			
Principal Place of Business Mailing Address											
9560-9580 W BAY HARBOR DR BAY HARBOR FL 33154			9580 W. BAY HARBOR DR. APT. 9 (YANOFF)								
⇒US			BAY HARBOR FL 33154				INTÄÄTÄNNIN MANÄHTA		N TOTAL PARAMETER		=
		US	~		·		-				
2. Principal Pl	ace of Business	2a. Mailing	Address				rated or Qualifed		· · ·		
21			26				04/20/1977				
Suite, Apt.	#; etc.	_	Suite, Apt. #, etc.						App	olied For	
22	_	27				59-206626	04			t Applicable	
City & State	e · ·	City & S	City & State			5. Certifcate of	Status Desired		\$8.75 A		
23		28				<u> </u>	•			Fee Required	
Zip	Country	Zip				6. Election Cam			\$5.00 i Added to		
24	9. Name and Address of Curre	29	30	<u> </u>	<u> </u>	10. Name and A	ddress of New R	egistered /		71665	
	9. Name and Address of Curre	ent Registered Ag	ent	81	Name	· · · · · · · · · · · · · · · · · · ·	daress of feeth fe	ogiotoi e .			
					11.		` .				
MOLJO, I.		•	-	82	Street Addre	ess (P.O. Box Numb	per is Not Accepta	•			
9411 S.W				83		·		, ,			
PEMBHUR	KE PINES FL 33025						*				
				84	City	v		FL	85 Zip C	,oae	
11. Pursuant	to the provisions of Sections 617.05 egistered agent, or both, in the State	02 and 617:1508.	Florida;Statutes, th	ne aboye	named corpo	oration:submits.this.	statement for the	purpose of	changing its	registered	==
office or re	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such	change was author	rized by Statutes	the corporatio	n's board of directo	rs. I hereby accep	t the appoir	ntment as reg	jistered	
-	III (alliala with, and accept the obing	Jacons OI, CCCIOII	011,0000,1.0.100	01010100	•					1	1
SIGNATURE	Signature, typed or printed name of registered ag	gent and title if applicable.	(NOTE: Regis	stered Ager	nt signature required			DATE			. :
12.	OFFICERS A	ND DIRECTORS		13.		ADDITIONS/C	HANGES TO OF	FICERS AN			. !
TITLE	PD		DELETE	1.1 TITLE					Change	☐ Addition	;
NAME	BOHANNON, MICHAEL			1.2 NAME						,	. !
STREET ADDRESS	9560 W BAY HARBOR DR #1	03		1.3 STREET	ADDRESS					٠.	į
CITY-ST-ZIP	BAY HARBOR FL			1.4 CITY-S	T-ZIP						į
TITLE	VD ,		☐ DELETE	2.1 TITLE			-		Change	Addition	. '
NAME	RUIZ, DEANY			2.2 NAME	ļ					,	
STREET ADDRESS	9570 W. BAY HARBOR DR #1	107		2.3 STREET	FADDRESS			*			
CITY-ST-ZIP	BAY HARBOR ISLD. FL			2. 4 CITY-S	ST-ZIP		•	<u> </u>	Change	Addition	
TITLE	TD		_	3.1 TITLE			-	٠.	Change	[] Addition	
NAME	MOLJO, I. PIERRE	٠	1	3.2 NAME			•		•		
STREET ADDRESS	9580 W BAY HARBOR DR				T ADDRESS	• •	•	. *			
CITY-ST-ZIP	BAY HARBOR ISLD. FL			3.4. CITY-S	IT-ZIP				Change	Addition	
TITLE				4.1 TITLE 4.2 NAME			٠ - ٠ ١			. —	
NAME					T 4 D D D C C C		•				
STREET ADDRESS				4.3 STREE						ļ	ı
CITY-ST-ZIP				4.4 CITY-S 5.1 TITLE	1-217				☐ Change	☐ Addition	ĺ
TITLE			_	5.2 NAME	1	*.			- •	_	
NAME STREET ANDRESS	•				TADORESS		_				
STREET ADORESS	,			5.4 CITY-S	1	•					
CITY-ST-ZIP TITLE	· · · · · · · · · · · · · · · · · · ·			6.1 TITLE					Change	Addition	ĺ
NAME				6.2 NAME	-				, .	ļ	ĺ
STREET ADDRESS.	-		,		TADDRESS				,		
UNCELADOREGO.										,	

14. 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 annual report or supplemental annual 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 12 or Block 13 Changed, promote a supplement with an address with all other like empowered to COLOO

6.4 CITY-ST-ZIP

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Date

Daytime Phone #

Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90005 013 ****61.25