NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2002 8:00 am
Secretary of State
04-17-2002 90163 030 ****61.25

DOCUMENT # 741850

1. Entity Name
Mon Pct.it Condominum Association, Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2300 S.E. 2nd St.	P.O. Box 1327
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Pompano Beach FL.	City & State: Jupiter, FL.
Zip: 33062 Country: U.S.	Zip: 33468 Country: US

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2070033 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: DORIS J. RYNARD

Street Address (P.O. Box Number is Not Acceptable): 6110 Dania St.

City: Jupiter FL Zip Code: 33458

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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FEE IS $61.25 Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President P-D Cristich Peggy 3910 N.E. 27th Terrace Lighthouse Point, FL. 33064
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer T-D Rynard, Doris J. P.O. Box 1327 - 6110 Dania St. Jupiter, FL. 33468
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary S-D Rynard, Harold P.O. Box 1327-6110 Dania St Jupiter, FL. 33468
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Doris J. Rynard treasurer Doris J. Rynard 4-8-02 561-748 9902
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 6110 Dania St. 33458 Date Daytime Phone #