**FILED** 

Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90076 007 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # **K46486**

1. Corporation Name

MONARCH MAINTENANCE COMPANY

Principal Place of Business Mailing Address							7	I 10019111 OIL BIBIO AILE DISON IDI	10 DIN BIR	il Birli Girli Ci	HEAD BURNE BARAN HARD
12908 AIR WAY ST.   12908 AIR WAY ST.   PANAMA CITY FL 32404-2833   PANAMA CITY FL 32404-21   US   US   US   US   US   US   US   U				-2833	33						
00		U\$					<u></u>	DO NOT WRIT	E IN TH	IS SPACE	
							3.	Date Incorporated or Qualifed			
2. Principal F	Place of Business	2a.	Mailing Address				+-	11/21/1988 FEI Number		3-1	
21		26	Training Flacinoss				-	65-0085661			Applied For
Suite, Apt	. #, etc.	<del></del>	Suite, Apt. #, etc.	<del></del>			+	03-0003001	— <del>-</del> —		Not Applicable
27							5.	Certifcate of Status Desired			5 Additional Required
City & Sta	te		City & State				-	Election Campaign Financing			<del></del> :
23		28					".	Trust Fund Contribution		-	<b>00</b> May Be ed to Fees
Zip	Country	Z	Zip	Coun	itry		8	This corporation owes the curre	nt woor I		30 to rees
24				30			"	Personal Property Tax.	in year i	Yes ⊻i Yes	□No
	9. Name and Address of Curre	ent Registe	red Agent				10.	Name and Address of New Re	agistere		
VOI	INC. HIDITH C				81	Name					
YOUNG, JUDITH C				ļ.	82 Street Addre			O Barristania			
12908 AIR WAY STREET					Sileet Addre	755 (F	P.O. Box Number is Not Acceptat	не)			
PAN	IAMA CITY FL 32404-2833			1	В3			·			-
				-							
					84	City			F		ip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607	.1508, Florida Stat	utes, the abo	ove	-named corpo	ration	submits this statement for the p		<del>-</del>	its registered
	egistered agent, or both, in the State im familiar with, and accept the oblig						n's bo	pard of directors. I hereby accept	the app	ointment as	registered
SIGNATURE			,	75.1122 -10.00							
	Signature, typed or printed name of registered ag	ent and title if ap	pplicable. (NO	TE: Registered A	gent	signature required v	when re	einstating)	DATE		
12.	OFFICERS A	ND DIRECT	· — — — —	13.			- /	ADDITIONS/CHANGES TO OFFI	CERS A	ND DIRECT	TORS IN 12
TITLE	PD		☐ DELETE	1.1 TITLE	E			-		Chang	
NAME	YOUNG, DAVID F			1.2 NAM	Ε						
STREET ADDRESS	12908 AIR WAY ST.			1.3 STRE	EET A	ADDRESS					
CITY-ST-ZIP	PANAMA CITY FL 32404-2833	<u>;                                    </u>		1.4 CITY	-ST-	-ZIP					
TITLE	VT		☐ DELETE	2.1 TITLE	=					☐ Change	e
NAME	HUGHEY, BONNIE J.			2.2 NAME	E						
STREET ADDRESS	18495 S DIXIE HWY, B102			2.3 STRE	ET A	ADDRESS					
CITY-ST-ZIP	MIAMI FL 33157			2. 4 CITY	· ST-	-ZIP					
ΠΠLE	VS		☐ DELETE	3.1 TITLE	:			, , , , , , , , , , , , , , , , , , , ,		Change	e Addition
NAME	YOUNG, JUDITH C			3.2 NAME	E			_			
STREET ADDRESS	12908 AIR WAY ST.			3.3 STRE	ETA	ADDRESS					
CITY-ST-ZIP	PANAMA CITY FL 32404-2833			3.4. CITY	-ST-	-ZIP					
TITLE			☐ DELETE	4.1 TITLE						Change	e Addition
NAME				4. 2 NAMI	Ė						
STREET ADDRESS				4.3 STRE	ETA	ODORESS .					
CITY-ST-ZIP				4.4 CITY-	ST-Z	ZIP					
TITLE			☐ DELETE	5.1 T/TLE						☐ Change	Addition
NAME				5.2 NAME	:						
STREET ADDRESS				5.3 STREE	ET A	(DDRESS					
CITY-ST-ZIP			<u> </u>	5.4 CITY-	ST-Z	ZIP					
TITLE			☐ DELETE	6.1 TITLE						☐ Change	Addition
NAME				6.2 NAME							_
STREET ADDRESS				6.3 STREE	ET A[	DORESS					
CITY-ST-ZIP				6.4 CITY-	ST-Z	ZIP					

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, of on an attachment with an address, with all other like empowered.

SIGNATURE: