## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L02000023099

Entity Name

MONARCH REALTY GROUP, LLC



FILED Jul 22, 2008 08:00 AM Secretary of State

Principal Place of Business

PALM CITY, FL 34990

2601 SW MONARCH CLUB DRIVE

Mailing Address

2601 SW MONARCH CLUB DRIVE Palm City, Fl 34990





07142008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 06-1650034 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

YATSKO, DOROTHY 2601 SW MONARCH CLUB DRIVE PALM CITY, FL 34990

## DO NOT WRITE IN THIS SPACE

				IN THIS SPACE			
	named entity submits this statement for tions of registered agent.	the purpose of cha	anging its registered	d office or registered agent, or both,	in the State of Florida. I am familiar with	, and accept	
SIGNATURE	Signature, typed or printed name of registered agent a	nd life if applicable	(NOTE: Registered	Agent signature required when reinstating)	DATE		
	E NOW!!! FEE I\$ \$138.75 b by September 12, 2008			3(2)(b), F.S., the limited ive the prior notice.	U00000955953 07/22/08-80013-008	138.75	
9.	MANAGING MEMBER	RS/MANAGERS		,		,	
NAME STREET ADDRESS CITY-ST-ZIP	MGR YATSKO, DOROTHY 2601 SW MONARCH CLUB DR PALM CITY, FL 34990						
NAME STREET ADDRESS CHY-ST-ZIP					•		
TOTALE							

## DO NOT WRITE IN THIS SPACE

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME STREET ADDRESS

NAME STREET ADDRESS CATY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

JRE: USANAM USANATURE AND TYPEO OR PRINTED NAME OF SIGNING M

NAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1.17.08

Daytime Phone #