## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000024607

Entity Name: THE MONARCH DEVELOPMENT GROUP, LC

FILED Jan 16, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

407 CATHERINE STREET 1011 WHITEHEAD STREET KEY WEST, FL 33040 KEY WEST, FL 33040

Current Mailing Address: New Mailing Address:

407 CATHERINE STREET PO BOX 1471

KEY WEST, FL 33040 KEY WEST, FL 33041

FEI Number: 57-1179056 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROBBINS, WILLIAM O III

407 CATHERINE STREET

KEY WEST, FL 33040 US

ROBBINS, WILLIAM O III

1011 WHITEHEAD STREET

KEY WEST, FL 33040 US

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: WILLIAM O ROBBINS III 01/16/2006

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 ROBBINS, WILLIAM O III
 Name:
 ROBBINS, WILLIAM O III

 Address:
 407 CATHERINE STREET
 Address:
 PO BOX 1471

 City-St-Zip:
 KEY WEST, FL 33040
 City-St-Zip:
 KEY WEST, FL 33041

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition Name: MCMAHON, DANIEL J Name: MCMAHON, DANIEL J

Address: 407 CATHERINE STREET Address: PO BOX 1471
City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33041

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

Name: MUZZY, DONNA L Name:

Address: 50 WOODLAWN AVENUE

Address: 50 WOODLAWN AVENUE

Address: 50 WOODLAWN AVENUE Address: City-St-Zip: WELLESLEY, MA 02481 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MUZZY, GREGORY E
 Name:

 Address:
 50 WOODLAWN AVENUE
 Address:

 City-St-Zip:
 WELLESLEY, MA 02481
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: WILLIAM O ROBBINS III MGRM 01/16/2006