


AMENDED
2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

05-01-2006 90462 011 ***61.25
 N00000000852

DOCUMENT # N00000000852

1. Entity Name
MELROSE HOMES II AT MONARCH LAKES
HOMEOWNERS ASSOCIATION, INC.



FILED
06 MAY 22 AM 11:44
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business
C/O T & S CONTINENTAL GROUP
2950 N 28TH TERRACE
HOLLYWOOD, FL 33020

Mailing Address
C/O T & S CONTINENTAL GROUP
2950 N 28TH TERRACE
HOLLYWOOD, FL 33020



2. Principal Place of Business
C/O Landmark Mg.
 Suite, Apt. # etc.
1941 NW 160 Ave
 City & State
Pembroke Pines, Fl.
 Zip
33008 Country
Bro.

3. Mailing Address
C/O Landmark Mg.
 Suite, Apt. # etc.
1941 NW 160 Ave
 City & State
Pembroke Pines, Fl.
 Zip
33008 Country
Bro.

04102006 Chg-NP CR2E037 (11/05)

4. FEI Number
65-1016578 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
RANDALL K. ROGER & ASSOCIATES, PA
621 NW 53RD STREET, #300
BOCA RATON, FL 33487

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

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

Filing Fee is \$81.25 Due by May 4, 2006

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SILVA, FERNANDO 2717 SW 128 AVE MIRAMAR, FL 33027	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HATTON, TSONA 15749 SW 27 STREET MIRAMAR, FL 33027	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S THOMPSON, RICHARD 2742 SW 127 AVE MIRAMAR, FL 33027	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MADISON, MOSES 12612 SW 28 STREET MIRAMAR, FL 33027	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LORDO, ROBERT 12729 SW 27 STREET MIRAMAR, FL 33027	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President - P, TREASURER Richard Welch 2347 SW 125 Ave Miramar Fl. 33027	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice Pres. - V.P. Stephen Boos 2267 SW 126 Ave Miramar Fl 33027	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary - S Robert King 2211 SW 125 Ave Miramar, Fl. 33027	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Sam Pongnon 2291 SW 125 Ave Miramar Fl. 33027	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Kirt Jones 12922 SW 24 St. Miramar Fl. 33027	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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 Block 11 if changed, or on an attachment with an address, with all other lists empowered.

SIGNATURE: Richard Welch DATE: 4-24-06 Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR