


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

03-17-2006 90131 003 *****61.25
N00000006953

DOCUMENT # N00000006953

1. Entity Name
MARIPOSA ISLES AT MONARCH LAKES HOMEOWNERS' ASSOCIATION, INC.



FILED

06 MAR 23 AM 9:18

Principal Place of Business
**THE CONTINENTAL GROUP
2950 NORTH 28TH TERRACE
HOLLYWOOD, FL 33020**

Mailing Address
**THE CONTINENTAL GROUP
2950 NORTH 28TH TERRACE
HOLLYWOOD, FL 33020**

40033798 STATE OF FLORIDA



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

02172006 Chg-NP CR2E037 (11/05)

City & State
Zip Country

4. FEI Number
65-1101377

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
**BAKALAR & EICHNER, P.A.
150 SOUTH PINE ISLAND ROAD
SUITE 540
PLANTATION, FL 33324**

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 resigning)

**Filing Fee is \$61.25
Due by May 1, 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PHILLIPS, DEBBIE 13142 S.W. 30TH STREET MIRAMAR, FL 33027	<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, RANIS 3198 SW 132 AVE MIRAMAR, FL 33027	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD STARKES, JAMES 3115 S.W. 131 AVENUE MIRAMAR, FL 33027	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUNNINGHAM, KYLE 13158 S.W. 30 STREET MIRAMAR, FL 33027	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD COLBERT, BRYAN 13187 S.W. 31 STREET MIRAMAR, FL 33027	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>3/3/23</i>	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Phillips, Deborah	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Williams, Rannis	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Pierre, Gloria 13126 SW 29 Street Mira Mar, FL 33027	<input type="checkbox"/> Change <input checked="" 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 like empowered.

SIGNATURE: *Deborah A. Phillips* **Deborah A. Phillips** Date: **3/8/06** 951-322-2216