

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007546

FILED
Feb 04, 2009
Secretary of State

Entity Name: POD 10 AT MONARCH LAKES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O PRIME MANAGEMENT GROUP, INC.
6300 PARK OF COMMERCE BLVD.
BOCA RATON, FL 33487 US

New Principal Place of Business:

Current Mailing Address:

C/O PRIME MANAGEMENT GROUP, INC.
6300 PARK OF COMMERCE BLVD.
BOCA RATON, FL 33487 US

New Mailing Address:

C/O PRIME MANAGEMENT GROUP, INC.
13460 S.W. 10TH STREET SUITE 101
PEMBROKE PINES, FL 33027 US

FEI Number: 65-1054907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAKALAR, EICHNER P.A.
150 SOUTH PINE ISLAND ROAD
SUITE 540
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: CHANG, JERRY
Address: 3125 SW 133RD AVE
City-St-Zip: MIRAMAR, FL 33027

Title: P () Delete
Name: DAVIS, SCOTT
Address: 2959 SW 133 AVE
City-St-Zip: MIRAMAR, FL 33027

Title: T () Delete
Name: TOLEDO, SAMUEL
Address: 2926 SW 135 AVE
City-St-Zip: MIRAMAR, FL 33027

Title: SD () Delete
Name: COLEY, IRENE
Address: 133313 SW 31 ST
City-St-Zip: MIRAMAR, FL 33027

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: BAHADUR, PAUL
Address: 2906 S.W. 135 AVE
City-St-Zip: MIRAMAR, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCOTT DAVIS

P

02/04/2009

Electronic Signature of Signing Officer or Director

Date