

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003578

FILED  
Mar 04, 2011  
Secretary of State

**Entity Name:** VINEYARDS AT MONARCH LAKES COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

THE CONTINENTAL GROUP  
2950 N. 28 TERRACE  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

THE CONTINENTAL GROUP  
2950 N. 28 TERRACE  
HOLLYWOOD, FL 33020

**New Mailing Address:**

**FEI Number:** 65-1106585

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAW OFFICE OF ROBERT P. KELLY  
2514 HOLLYWOOD BLVD.  
SUITE 307  
HOLLYWOOD, FL 33020 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  
Name: FELIX, CARBALLO  
Address: 2950 N 28 TERRACE  
City-St-Zip: HOLLYWOOD, FL 33020

Title: S  
Name: DEVEAUX, MARY  
Address: 2950 N 28 TERRACE  
City-St-Zip: HOLLYWOOD, FL 33020

Title: P  
Name: RAMDEEN, LESLIE  
Address: 2950 N 28 TERRACE  
City-St-Zip: HOLLYWOOD, FL 33020

Title: T  
Name: JOSEPH, FRANCOIS  
Address: 2950 N 28 TERRACE  
City-St-Zip: HOLLYWOOD, FL 33020

Title: D  
Name: SANCHEZ, NESTOR  
Address: 2950 N 28 TERRACE  
City-St-Zip: HOLLYWOOD, FL 33020

I hereby 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 all other like empowered.

SIGNATURE: LESLIE RAMDEEM

P

03/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date