

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007119

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: MONARCH KNIGHTS SPIKERS CLUB, INC.

## Current Principal Place of Business:

5222 N.W. 51 STREET  
COCONUT CREEK, FL 33073

## New Principal Place of Business:

231 NW 45 AVE  
DEERFIELD BEACH, FL 33442

## Current Mailing Address:

231 NW 45 AVE  
DEERFIELD BEACH, FL 33442

## New Mailing Address:

FEI Number: 20-0165475      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FLINN, RANDA  
5222 NW 51 ST  
COCONUT CREEK, FL 33073      US

## Name and Address of New Registered Agent:

KEENAN, ALISON  
231 NW 45  
DEERFIELD BEACH, FL 33442      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: ALISON KEENAN

04/28/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD      ( ) Delete  
Name: SCHROEDER, RHONDA PRESIDE  
Address: 3947 N.W. 7 PL  
City-St-Zip: DEERFIELD BEACH, FL 33442 US

Title: VD      ( ) Delete  
Name: JOHNSON, KATHRYN VICE PR  
Address: 7370 N.W. 44 LANE  
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: SD      ( ) Delete  
Name: FLINN, RANDA SECRETA  
Address: 5222 NW 51 TERR  
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: TD      ( ) Delete  
Name: KEENAN, ALISON TREASUR  
Address: 231 NW 45 AVE  
City-St-Zip: DEERFIELD BEACH, FL 33442 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD      (X) Change ( ) Addition  
Name: NOAKES, SUSAN SECRETA  
Address: 1000 COCONUT CREEK BLVD  
City-St-Zip: COCONUT CREEK, FL 33063 US

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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 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: ALISON KEENAN

TD

04/28/2006

Electronic Signature of Signing Officer or Director

Date