## 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N03000010282

FILED Apr 27, 2005 Secretary of State

Entity Name: MONARCH HIGH KNIGHTS BASEBALL BOOSTER CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

6960 NW 5 CT 5145 NW 42ND AVE

MARGATE, FL 33063 COCONUT CREEK, FL 33073

Current Mailing Address: New Mailing Address:

6960 NW 5 CT 5145 NW 42ND AVE

MARGATE, FL 33063 COCONUT CREEK, FL 33073

FEI Number: 20-0486749 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

HATHAWAY, BERNADETTE P KOCINSKI, MICHAEL A 6960 NW 5 CT 5145 NW 42ND AVE

MARGATE, FL 33063 US COCONUT CREEK, FL 33073 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: MICHAEL A. KOCINSKI 04/27/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: DP ( ) Delete Title: DP (X) Change ( ) Addition

 Name:
 HATHAWAY, BERNADETTE P
 Name:
 RIPOLL, MARK

 Address:
 6960 NW 5 CT
 Address:
 5257 NW 51ST COURT

City-St-Zip: MARGATE, FL 33063 City-St-Zip: COCONUT CREEK, FL 33073

Title: DV ( ) Delete Title: DV (X) Change ( ) Addition Name: RIPOLL, MARK J Name: SARGENT, ARMAND

 Address:
 5257 NW 51 CT
 Address:
 6292 NW 36TH AVE

 City-St-Zip:
 COCONUT CREEK, FL 33073
 City-St-Zip:
 COCONUT CREEK, FL 33073

Title: DS ( ) Delete Title: DS (X) Change ( ) Addition

Name: GARRON, GEORGE E Name: SARGENT, DORIS

 Address:
 4528 NW 51 CT
 Address:
 6292 NW 36TH AVE

 City-St-Zip:
 COCONUT CREEK, FL 33073
 City-St-Zip:
 COCONUT CREEK, FL 33073

Title: DT ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 KOCINSKI, MICHAEL A
 Name:

 Address:
 5145 NW 42 AVE
 Address:

 City-St-Zip:
 COCONUT CREEK, FL 33073
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL A. KOCINSKI DT 04/27/2005