## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000002239

FILED Feb 26, 2009 Secretary of State

Entity Name: MONTE CARLO TOWNHOMES OF MARGATE HOMEOWNERS ASSOCIATION, INC.

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

10034 W MCNAB ROAD TAMARAC, FL 33321 US

Current Mailing Address: New Mailing Address:

7975 NW 154TH STREET, SUITE 400 10034 W MCNAB ROAD MIAMI LAKES, FL 33016 US TAMARAC, FL 33321 US

FEI Number: 20-2425207 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BROUGH, CHADROW, & LEVINE, P.A. 1900 N. COMMERCE PKWY. WESTON, FL 33326 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD () Delete Title: P (X) Change () Addition
Name: DAVIS, TIFFANY
Address: 5532 MONTE CARLO LANE

 Address:
 5532 MONTE CARLO LANE
 Address:
 5532 MONTE CARLO LANE

 City-St-Zip:
 POMPANO BEACH, FL 33068
 City-St-Zip:
 MARGATE, FL 33068

Title: Title: (X) Change ( ) Addition ( ) Delete MAYOR, MATIAS Name: RAMSARRAN, SHARMILA Name: Address: 521 ST. TROPER LN. Address: 5632 MONTE CARLO LANE City-St-Zip: MARGATE, FL 33068 City-St-Zip: MARGATE, FL 33068

Title: D ( ) Change (X) Addition

 Name:
 Name:
 GARCIA, LUIS

 Address:
 Address:
 10034 W MCNAB RD

 City-St-Zip:
 City-St-Zip:
 TAMARAC, FL 33321

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

 Name:
 Name:
 GARCIA, RUFINO

 Address:
 Address:
 10034 W MCNAB RD

 City-St-Zip:
 City-St-Zip:
 TAMARAC, FL 33321

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: TIFFANY DAVIS P 02/26/2009