

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005478

FILED
Feb 26, 2009
Secretary of State

Entity Name: MONARCH PROFESSIONAL CENTRE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O FLORIDA TRUST REALTY
210 N UNIVERSITY DR, #200
CORAL SPRINGS, FL 33071

New Principal Place of Business:

C/O FLORIDA TRUST REALTY
210 N UNIVERSITY DR, #200
CORAL SPRINGS, FL 33071

Current Mailing Address:

C/O FLORIDA TRUST REALTY
210 N UNIVERSITY DR, #200
CORAL SPRINGS, FL 33071

New Mailing Address:

C/O FLORIDA TRUST REALTY
210 N UNIVERSITY DR, #200
CORAL SPRINGS, FL 33071

FEI Number: 20-8305787

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARGENTI, ROBERT J
C/O FLORIDA TRUST REALTY INC.
210 N UNIVERSITY DR, #200
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

ARGENTI, ROBERT J
C/O FLORIDA TRUST REALTY INC.
210 N UNIVERSITY DR, #200
CORAL SPRINGS, FL 33071 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:

02/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ANNICCHARICO, FRANCISCO
Address: 12741 MIRAMAR PARKWAY, #301
City-St-Zip: MIRAMAR, FL 33027

Title: DV () Delete
Name: ROSADO, ITZA
Address: 12781 MIRAMAR PARKWAY, # 201
City-St-Zip: MIRAMAR, FL 33027

Title: DST () Delete
Name: HOYOS, ROSSANA
Address: 12781 MIRAMAR PARKWAY, #204
City-St-Zip: MIRAMAR, FL 33027

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:

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: FRANCISCO ANNICCHARICO

DP

02/26/2009

Electronic Signature of Signing Officer or Director

Date