2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 11, 2008 8:00 am Secretary of State

PRIME Place of Business	DOCUMENT # N17147 1. Entity Name MONARCH COUNTRY CLUB HOMEOWNERS ASSOCIATION, INC.								0055 020 ****	
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite Cry & State Cry & Cry & State Cry & Cry & State Cry & S	2601 SW MONARCH CLUB DRIVE PO			POST OFFICE BOX			1 110/1/10 40/1 11	ari idadi jibil bibli debi	i alati atah atah eleki al	DIT BYDHAU DI 160)
Coy & State City & State City & State City & State Country Co	2. Principal Place of Business - No P.O. Box #			3. Mailing Address						
Specification Specificatio	Suite, Apt. #, etc.			Suite, Apt. #, etc.			01282008	Chg-NP	CR2E037 (12/	06)
8. Certificate of Status Desired Fee Required Agent Fee Required Age	City & State			City & State		•		647		
Name	Zip	Zip Country		Zip Co		ıntry	5. Certificate of	Status Desired		
CORNETT, JANE L 401 EAST OSCOLA STREET STUART, FL 34994 City FL Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Filling Fee is \$61.25 Due by May 1, 2008 9. Election Campaign Financing Trust Fund Contribution. TILE TOPIC		6. Name	and Address of Current I	Registered Agent			7. Name and A	ddress of New R	tegistered Agent	
B. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature Inches	401 EAST OSCEOLA STREET									
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature Signature Signature in part of incidence agent and site if applicable. (NOTE Registered Agent signature required when remaining) DATE Filling Fee is \$61.25 Due by May 1, 2008 Placetion Campsign Frenchion S5.00 May Be Added to Fees Florida Department of State						City	·	<u>.</u>	⊏ I Zip	Code
SIGNATURE Synams, higher or primed name of implicated agent and stell acplication (NOTE Registered Agent signature required when instrators) DATE	8. The above	named entitions of regist	y submits this statement for tered agent.	the purpose of changing	j its register	ed office or regist	ered agent, or both,	in the State of Flo	;	with, and accept
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Due by May 1, 2008	SIGNATURE	Signature, typed	or printed name of registered agent a	nd title il applicable. (NOTE: Registere	d Agent signature requir	ed when reinstating)		DATE	
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STREET ADDRESS 1588 S.W. MONARCH CLUB DR. CITY-ST-ZIP PALM CITY, FL 34990 12 Liberaby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119 Florida Statutes. I further certify that the information	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SEMPIER 1839 SW PALM CIT VP SEBOLD, 2326 SW PALM CIT VP CELIA, JC 1872 SW PALM CIT VP GLOVER, 2258 SW PALM CIT S SOLORZ, 1724 SW	ABY 1, 2008 OFFICERS AND DIR R, BOB WILLOWBEND LN. IY, FL 34990 HELEN WHITEMARSH WAY IY, FL 34990 DE LIMARRON CT. IY, FL 34990 RICHMOND BRADFORD IY, FL 34990 ANO, CEASAR FORPOINT TR	Trust Fur ECTORS Delete Delete Delete	11. TITL NAM STRI CITY	E POI EET ADDRESS 16ST-ZIP Pa EET ADDRESS 18ST-ZIP Pa EET ADDRESS 18ST-ZIP Pa EET ADDRESS 17ST-ZIP Pa EET ADDRESS 18ST-ZIP PA ET ADD	Added to Fees ADDITIONS/CHAN ito, Micha 76 SW M Im City, F Imert, Che 74 SW E 1m City Manus, 42 SW Im City Orzano 24 SW 21 SW	Floringes TO OFFICE el Monarch C 2 3499 arles Bradford FL 34 Cesar Fox point	Place 990 Che 1990 Che 1990 Che 1990	of State RS IN 10 Inge IN Addition
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12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes, it further certify that the information	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	T SEMPIER 1839 SW PALM CIT VP SEBOLD, 2326 SW PALM CIT VP CELIA, JO 1872 SW PALM CIT VP GLOVER, 2258 SW PALM CIT S SOLORZ 1724 SW PALM CIT PD AYRES, F	ABY 1, 2008 OFFICERS AND DIR R, BOB WILLOWBEND LN. ITY, FL 34990 HELEN WHITEMARSH WAY ITY, FL 34990 DE LIMARRON CT. ITY, FL 34990 RICHMOND BRADFORD ITY, FL 34990 ANO, CEASAR FORPOINT TR ITY, FL 34990 RICHARD	Trust Fur ECTORS Delete Delete Delete Delete	11. TITL NAM STRI CITY	E POI EET ADDRESS 16 -ST-ZIP POI EET ADDRESS -ST-ZIP	Added to Fees ADDITIONS/CHAN ito, Micha 76 SW M Im City, F Imert, Che 74 SW E 1m City Manus, 42 SW Im City Orzano 24 SW 21 SW	Floringes TO OFFICE el Monarch C 2 3499 arles Bradford FL 34 Cesar Fox point	Place 990 Chare 1990 Chare 1990 Chare 1990 Chare	of State RS IN 10 Inge IX Addition IX Addition IX Addition IX Addition IX Addition IX I
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: .