## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000005442

Entity Name: MONTICELLO OWNERS ASSOCIATION, INC.

FILED Apr 20, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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4400 NW 36TH AVE 5522 NW 43 STREET

GAINESVILLE, FL 32606 US SUITE B

GAINESVILLE, FL 32653 US

Current Mailing Address: New Mailing Address:

4400 NW 36TH AVE 5522 NW 43 STREET

GAINESVILLE, FL 32606 US SUITE B

GAINESVILLE, FL 32653 US

FEI Number: 59-3508053 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:

TRIPPE, PAT LINDSEY, GLENDA

4400 NW 36TH AVE C/O BOSSHARDT PROPERTY MGT INC

GAINESVILLE, FL 32606 US 5522-B NW 43 STREET GAINESVILLE, FL 32653 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: GLENDA LINDSEY 04/20/2006

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 LUDWIG, KIRK
 Name:
 IMPERI, JODI

 Address:
 4946 NW 1ST PLACE
 Address:
 5928 NW 33 AVENUE

 City-St-Zip:
 GAINESVILLE, FL 32607
 City-St-Zip:
 GAINESVILLE, FL 32606

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

 Name:
 THARP, DAVID
 Name:
 THARP, DAVID

 Address:
 8901 ROBERTS RD
 Address:
 8901 ROBERTS RD

 City-St-Zip:
 ODESSA, FL 33556
 City-St-Zip:
 ODESSA, FL 33556

Title: S ( ) Delete Title: SD (X) Change ( ) Addition

 Name:
 IMPERI, JODY
 Name:
 PECK, AMMON

 Address:
 5928 NW 33RD PLACE
 Address:
 346 NW 50 BLVD

 City-St-Zip:
 GAINESVILLE, FL 32606
 City-St-Zip:
 GAINESVILLE, FL 32607

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

 Name:
 DUNN, MATTHEW
 Name:

 Address:
 517 NW 50TH BLVD
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32607
 City-St-Zip:

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

 Name:
 FABINSKY, WALTER
 Name:

 Address:
 5067 NW 1ST PLACE
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32607
 City-St-Zip:

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

 Name:
 FRITCH, KEITH
 Name:

 Address:
 566 NW 50 BLVD
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32607
 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: JODI IMPERI PD 04/20/2006

Electronic Signature of Signing Officer or Director

Date