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Secretary of State
05-04-2006 90213 035 ****61.25

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # N97000006029

1. Entity Name
MONACO ESTATES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6767 N. WICKHAM RD SUITE 213 MELBOURNE, FL 32940	PO BOX 410759 MELBOURNE, FL 32941

02242006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-3484415 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ADVANCED PROPERTY MGMT 6767 N. WICKHAM RD SUITE 213 MELBOURNE, FL 32940	Nam Stre Advanced Property Mgmt, Inc. Suite 106 1978 Rockledge Blvd City Rockledge, FL 32955 ip 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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SITTON, CHARLES 2904 MADERIA CIR MELBOURNE, FL 32935	☐ Delete	TITLE PD NAME STREET ADDRESS CITY-ST-ZIP	Sitton Charles PD 2904 Maderia Circle Melbourne FL 32935	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CULLA, DORINDA A 2773 MADERIA CIRCLE MELBOURNE, FL 32935	☒ Delete	TITLE VP NAME STREET ADDRESS CITY-ST-ZIP	Morrison Bill 2776 Maderia Circle Melbourne FL 32935	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DIXON, ALAN 2721 MADERIA CIRCLE MELBOURNE, FL 32935	☒ Delete	TITLE SEC NAME TREA STREET ADDRESS CITY-ST-ZIP	Jenkins Hoke 1722 Cape Palos Dr. Melbourne, FL 32935	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Peters Jerry 1738 Cape Palos Dr. Melbourne FL 32935	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Subb Lou 2793 maderia Circle Melbourne, FL 32935	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby 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 indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 4-28-06 321 253 [illegible]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #