## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000001159

Entity Name: BANCES-MONARD INC.

FILED Apr 24, 2007 Secretary of State

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

1220 OXBOW LN

WINTER SPRINGS, FL 32708

Current Mailing Address: New Mailing Address:

1220 OXBOW LN 3302 HEIRLOOM ROSE PL. WINTER SPRINGS, FL 32708 OVIEDO, FL 32766

FEI Number: 59-3690027 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:

BANCES, JOSE
1220 OXBOW LN
BANCES, JOSE
3302 HEIRLOOM ROSE PL

WINTER SPRINGS, FL 32708 US OVIEDO, FL 32766 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: 04/24/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: BANCES, JOSE Name: BANCES, JOSE

 Address:
 1220 OXBOW LN
 Address:
 3302 HEIRLOOM ROSE PL.

 City-St-Zip:
 WINTER SPRINGS, FL 32708
 City-St-Zip:
 OVIEDO, FL 32766

ку-бедр. Williad, i E 32700 Ску-бедр. Ойдоб, i E 3270

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf ( ) Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X) Change ( ) Addition}$ 

Name: MONARD, MARIA Name: MONARD, MARIA

 Address:
 1220 OXBOW LN
 Address:
 3302 HEIRLOOM ROSE PL.

 City-St-Zip:
 WINTER SPRINGS, FL 32708
 City-St-Zip:
 OVIEDO, FL 32766

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE BANCES P 04/24/2007