

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000137756

**FILED**  
**Jan 08, 2012**  
**Secretary of State**

**Entity Name:** MONACO ESTATE HOMES, INC.

**Current Principal Place of Business:**

2118 EL DORADO PKY.W.  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

**Current Mailing Address:**

2118 EL DORADO PKY.W.  
CAPE CORAL, FL 33914

**New Mailing Address:**

**FEI Number:** 20-1701378

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHUTT, DARRIN R ESQ  
1105 CAPE CORAL PKWY EAST  
STE C  
CAPE CORAL, FL 33904 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** CLASSETTI, ARMONDO  
**Address:** 2118 EL DORADO PKY.W.  
**City-St-Zip:** CAPE CORAL, FL 33914

**Title:** VP  
**Name:** CLASSETTI, MICHAEL N  
**Address:** 2125 S.W.5TH CT  
**City-St-Zip:** CAPE CORAL, FL 33990

**Title:** SECT  
**Name:** CLASSETTI, PAULA B  
**Address:** 2118 EL DORADO PKY  
**City-St-Zip:** CAPE CORAL, FL 33914

I hereby 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 all other like empowered.

**SIGNATURE:** ARMONDO CLASSETTI

PRES

01/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date