

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721125

FILED
Jan 06, 2005
Secretary of State

Entity Name: THE DUNES TOWERS ASSOCIATION, INC.

Current Principal Place of Business:

5480 N OCEAN DR
RIVIERA BEACH, FL 33404

New Principal Place of Business:

Current Mailing Address:

5480 N OCEAN DR
RIVIERA BEACH, FL 33404

New Mailing Address:

FEI Number: 59-1396452 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHASAN, JOSEPH W
5480 N OCEAN DR
RIVIERA BEACH, FL 33404 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: T () Delete
Name: MUKHI, NARAIN
Address: 5480 N OCEAN DR
City-St-Zip: RIVIERA BEACH, FL 33404

Title: PD () Delete
Name: BUCHANAN, ROGER
Address: 5480 N. OCEAN DR.
City-St-Zip: RIVERA BEACH, FL 33404

Title: VP () Delete
Name: CHASAN, JOE
Address: 5480 N OCEAN DR
City-St-Zip: SINGER ISLAND, FL 33404

Title: D () Delete
Name: MARIA, ROBERT
Address: 5480 N OCEAN DR
City-St-Zip: SINGER ISLAND, FL 33404

Title: D () Delete
Name: WILLIAMS, DONALD
Address: 5480 N OCEAN DRIVE
City-St-Zip: SINGER ISLAND, FL 33404

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: KLANIAN, CHARLES
Address: 5480 N OCEAN DR
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D (X) Change () Addition
Name: BUCHANAN, ROGER
Address: 5480 N. OCEAN DR.
City-St-Zip: RIVERA BEACH, FL 33404

Title: PD (X) Change () Addition
Name: CHASAN, JOE
Address: 5480 N OCEAN DR
City-St-Zip: SINGER ISLAND, FL 33404

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOSEPH CHASAN

PD

01/06/2005

Electronic Signature of Signing Officer or Director

_____ Date