## **FILED** Apr 18, 2005 8:00 am Secretary of State

## 2005 NOT-FOR-PROFIT CORPORATION

DOCUMENT # 721529  1. Entity Name ALLINGTON TOWERS CONDOMINIUM, INC.								04-18-2005 90570 013 ****61.25 20036567			
Principal Place of Business 1600 S. OCEAN DR. HOLLYWOOD, FL 33019  Mailing Address 1600 S. OCEAN DR. HOLLYWOOD, FL 33019										,	
9. Delaginal Diago of Gusiasco											
2. Principal Place of Business 3. Ma				ailing Address			1 100111 18419 1	ILLEF KLOOL OLKKO ILOGE KOL	1 41981 BLOR BLAN BLAN AINN AINN I		
Suite, Apt. #, etc.			S	Suite, Apt. #, etc.				04112005	Chg-NP	CR2E037 (10/03)	)
City & State			Ci	City & State				4. FEI Number 59-1379		<b>-</b>	Applied For Not Applicable
Zip	Country		Zi	Zip Co		untry	5. Certificate of		f Status Desired	satus Desired S8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent					
SUNRAE MGMT SERVICES, INC.						Name					
7071 W COMMERCIAL BLVD SUITE 2B						Street Address (P.O. Box Number is Not Acceptable)					
TAMARAC, FL 33319											
						City FL Zip 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. Tam familiar with, and accept											
the obligations of registered agent.											
SIGNATURE											
Filing Fee is \$61.25 Due by May 1, 2005				Trust Fund Contribution.				\$5.00 May Be Added to Fees		ida Department of	
10.		OFFICERS AND D	RECTORS		11.		,	ODITIONS/CHA	NGES TO OFFICE	RS AND DIRECTORS	IN 10
TITLE NAME	P SHEA, MA	APGE		☐ Defete	TITL NAM		SCOTT	VERNALE.	b 4	Change	Addition
STREET ADDRESS		CEAN DRIVE # 3B				EET ADDRESS	1600	S OCEAN I			
CITY-ST-ZIP		OOD, FL 33019			CITY	-ST-ZIP		YWOOD, F	L 33019		
TITLE NAME	TD SBARBAR	RO, ROBERT		☐ Oelete	TITL		Durm	EAL BOYA.		☐ Change	Addition
STREET ADDRESS	1600 S. OCEAN DR, #16G				et address	ADDRESS 1600 S. OCEAN OKIVE					
CITY-ST-ZIP	HOLLYWOOD, FL 33019				CITY	-ST-ZIP	Hou	NWOOD, FI	- 33019	ä	
TITLE NAME	SD BOZEK, D	ONAL D		Delete	TITL NAV		the.	Col MAN		☐ Change	Addition
STREET ADDRESS		CEAN DR, #12B				et address	1000	Q. OCEAN J			`
CITY+ST-ZIP		OOD, FL: 33019	-	<u> </u>	4-	-ST-ZIP	Hou	YWOOD, FL	33019	- <u>*</u> -	<u>/</u> -
TITLE NAME	VPD NISSINOE	F, BEVERLY		☐ Defete	TITL		BILL	S. OCEAN	. Had	Change	Addition
STREET ADDRESS		CEAN DRIVE # 5E			1	et address	1600	S. OCEAN I	DE. #UN		
CITY-ST-ZIP		DOD, FL 33019	-		CITY	-ST-ZIP	HOL	7, DOOWHI	1 33019		
TITLE NAME	D Kaplan,	WILLIAM		☐ Defete	TITL					Change	Addition
STREET ADDRESS	1600 S. O	CEAN DR, #1E			STR	EET ADDRESS					
CITY-ST-ZIP	HOLLYW	OOD, FL 33019			+-	-ST-ZIP					
TITLE NAME				Delete	TITL					☐ Changi	e 🔲 Addition
STREET ADDRESS						et address					
CITY-ST-ZIP	<u> </u>	•				-ST-ZIP				<del></del>	
12. I hereby certify that the information supplied with this filing does not qualify 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 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.											