

FILED
Jun 15, 2004 8:00 am
Secretary of State

04-26-2004 90489 015 ****61.25

584 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # 726246

1. Entity Name
PHOENIX TOWERS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
2800 N. OCEAN DRIVE
RIVIERA BEACH, FL 33404

Mailing Address
2800 N. OCEAN DRIVE
RIVIERA BEACH, FL 33404

66428157



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04162004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-1452931

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

HERRLE, MICHELLE
2800 NORTH OCEAN DRIVE
APT A210
RIVIERA BEACH, FL 33404

Name

Street Address (P.O. Box Number is Not Acceptable)

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. 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 \$81.25
Due by May 1, 2004

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 **D** Delete
 NAME **GONSTEAD, ROBERT**
 STREET ADDRESS **2800 N OCEAN DR APT A 14 B**
 CITY-ST-ZIP **RIVIERA BEACH, FL 33404**

TITLE **JACK CAMPAGNULO - PRESIDENT** Change Addition
 NAME **JACK CAMPAGNULO - PRESIDENT**
 STREET ADDRESS **2800 N. OCEAN DR - B16A**
 CITY-ST-ZIP **RIVIERA BEACH, FL 33404**

TITLE **P** Delete
 NAME **HERCHE, MICHELLE**
 STREET ADDRESS **2800 N OCEAN DR APT A210**
 CITY-ST-ZIP **RIVIERA BEACH, FL 33404**

TITLE **GEORGE WITTMANN - DIR.** Change Addition
 NAME **GEORGE WITTMANN - DIR.**
 STREET ADDRESS **37 CHANNEL ROAD**
 CITY-ST-ZIP **TOMS RIVER, NJ 08753**

TITLE **T - T** Delete
 NAME **KUBIAK, EDWARD**
 STREET ADDRESS **2800 N OCEAN DR APT B-5**
 CITY-ST-ZIP **RIVIERA BEACH, FL 33404**

TITLE **JEAN WILLIAMS - VPRES.** Change Addition
 NAME **JEAN WILLIAMS - VPRES.**
 STREET ADDRESS **2800 N OCEAN - B15C**
 CITY-ST-ZIP **RIVIERA BEACH, FL 33404**

TITLE **D - D** Delete
 NAME **ROMANSKY, RICHARD**
 STREET ADDRESS **2800 N OCEAN DR APT B-9B**
 CITY-ST-ZIP **RIVIERA BEACH, FL 33404**

TITLE **AL CHARBONNEAU, DIR.** Change Addition
 NAME **AL CHARBONNEAU, DIR.**
 STREET ADDRESS **1550 GORDON ST. UNIT 41**
 CITY-ST-ZIP **GUELPH, ONT. CANADA N1L 1C7**

TITLE **VR - D** Delete
 NAME **CRAVELLE, JOANNE**
 STREET ADDRESS **2800 N OCEAN DR APT A-6B**
 CITY-ST-ZIP **RIVIERA BEACH, FL 33404**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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.

SIGNATURE:

John Campagnulo

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

Date

Daytime Phone #