

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737518

FILED  
Apr 24, 2011  
Secretary of State

**Entity Name:** MARBELLA TOWER OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

200 178TH DR  
OFFICE  
SUNNY ISLES BEACH, FL 33160 US

**New Principal Place of Business:**

**Current Mailing Address:**

200 178TH DR  
OFFICE  
SUNNY ISLES BEACH, FL 33160 US

**New Mailing Address:**

**FEI Number:** 59-2239890      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MARBELLA TOWER TOWER OWNERS ASSOC INC  
200 178TH DR OFFICE  
SUNNY ISLES BEACH, FL 33160 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: DT  
Name: LOWE, LUCILLE  
Address: 200 -178TH DRIVE  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: VPD  
Name: ORTONE, FRANK  
Address: 200 -178TH DRIVE,  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: D  
Name: CARAVELLA, BARNEY  
Address: 200-178TH DRIVE  
City-St-Zip: SUNNY ISLES, FL 33160

Title: PD  
Name: DITRAPANI, MARY  
Address: 200 -178TH DR #602  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: DS  
Name: CASSIDY, DOROTHY  
Address: 200-178 DRIVE  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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

SIGNATURE: MARY DI TRIPANI

PD

04/24/2011

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

\_\_\_\_\_  
Date