

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752089

FILED  
Apr 10, 2012  
Secretary of State

**Entity Name:** THE TOWERS OF QUAYSIDE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

ONE QUAYSIDE BLVD.  
MIAMI, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

ONE QUAYSIDE BLVD.  
MIAMI, FL 33138

**New Mailing Address:**

FEI Number: 59-2023759

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DAVIS, THOMAS  
ONE QUAY BLVD  
MIAMI, FL 33138 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: D  
Name: GARCIA, JORGE  
Address: 4000 TOWERSIDE TERR. #902  
City-St-Zip: MIAMI, FL 33138

Title: P  
Name: BERNSTEIN, ALLEN B  
Address: 4000 TOWERSIDE TERR. #906  
City-St-Zip: MIAMI, FL 33138

Title: T  
Name: MARKS, WILLIAM  
Address: 1000 QUAYSIDE TERR #1508  
City-St-Zip: MIAMI, FL 33138

Title: S  
Name: DE BLASIO, JANE L  
Address: 3013 QUAYSIDE LANE  
City-St-Zip: MIAMI, FL 33138

Title: VP  
Name: HERMAN, PAUL S  
Address: 1542 N.E. QUAYSIDE TERR.  
City-St-Zip: MIAMI, FL 33138

Title: D  
Name: GORDON, WILLIAM  
Address: 100 QUAYSUDE TERR SUITE 411  
City-St-Zip: MIAMI, FL 33138

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: JANE DE BLASIO

S

04/10/2012

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

\_\_\_\_\_  
Date