1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 752702

888 E. LAS OLAS BLVD.

GUSTAFON, JOEL K

FT.LAUDERDALE FL 33301

FT LAUDERDALE FL 33301

1 E. BROWARD BLVD., 13TH FLOOR

1. Corporation Name

TOWER FORUM, INC.

Principal Place o	f Business
P O BOX 39564	1
FT LAUDERDALE	FL 33339

Mailing Address

P O BOX 39564

FT LAUDERDALE FL 33339

FILED Mar 04, 1999 8:00 am § Secretary of State

03-04-1999 90114 045 ****61.25

						,			
2. Principal F	al Place of Business 2a. Mailing Address				3. Date incorporated or Qualifed 06/02/1980				
Suite, Apt.	#. etc.		Apt. #, etc.			4. FEI Number	Ap	plied For	
22		27				59-2194903	No	t Applicable	
City & Sta	te		State			5. Certifcate of Status Desired	\$8.75 A Fee Re		
Zip	Country 25	Zip 29	36	Country	,	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t		
24	9. Name and Address of Curre			,		10. Name and Address of New Registered Agent			
		<u> </u>	<u> </u>	81	Name				
WEARAGA BITTOOL				-	ļ. <u></u>	And the state of t			
KEARSON, PATRICIA				82	82 Street Address (P.O. Box Number is Not Acceptable)				
2666 N.E. 35 DRIVE FORT LAUDERDALE FL 33308-6314			83	83					
10111154	OBLIGALL I E GOOD GOTT			84	City		85 Zip C	Code	
l office or	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida, Suci pations of, Sectio	n change was autr n 617.0503, Florid	a Statutes	ine corpo	corporation submits this statement for the purpose oration's board of directors. I hereby accept the appropriate the property of the property	of changing its ointment as reg	registered gistered	
12.	Signature, typed or printed name of registered ag	ND DIRECTORS	• • • • • • • • • • • • • • • • • • • •	13.	nt signature n	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	
TITLE	D	UID DINECTOR	DELETE	1.1 TITLE			Change	Addition	
NAME	I			1.2 NAME			<u> </u>		
STREET ADDRESS	KEARSON, PATRICIA 2666 N.E. 35 DRIVE				T ADDRESS			•	
	1	2214		1.4 C/TY-S		,		,	
CITY-ST-ZIP	FORT LAUDERDALE FL 33308	D-00 14	☐ DELETE	2.1 TITLE	11-ZIP		Change Ch	☐ Addition	
	TD KOOLL KATUR			22 NAME	İ			_	
NAME	KOCH, KATHY	•		Z.Z NAME		· ·			

2.3 STREET ADDRESS

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

2. 4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME

4.1 TITLE

4 2 NAME

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

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CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other/like empowered.

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

2455 E. SUNRISE BLVD., SUITE 711

FT. LAUDERDALE, FL

Addition

Addition

___ Addition

Addition

☐ Change

Change

. Change