


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 10, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # 753085**  
 1. Entity Name  
 THE TOWER AT PORT ROYALE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 3200 PORT ROYALE DRIVE NORTH FT. LAUDERDALE, FL 33308  
 Mailing Address: 3200 PORT ROYALE DRIVE NORTH FT. LAUDERDALE, FL 33308

**DO NOT WRITE IN THIS SPACE**



01052005 No Chg-NP CR2E037 (10/03)

4. FEI Number: 59-2096190 Applied For: Not Applicable  
 5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 BECKER & POLIAKOFF  
 EMERALD LAKE CORPORATE PARK  
 3111 STIRLING ROAD  
 FT. LAUDERDALE, FL 33312-6525

**DO NOT WRITE IN THIS SPACE**

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

Filing Fee is \$61.25 Due by May 1, 2005  
 9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ESPOSITO, THOMAS
STREET ADDRESS	3200 PT. ROYALE, DRIVE, NORTH
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	PD
NAME	SFARZO, STEPHEN
STREET ADDRESS	3200 PORT ROYALE DR N
CITY-ST-ZIP	FT. LAUDERDALE, FL 33308
TITLE	VP
NAME	HASS, ROBERT
STREET ADDRESS	3200 PORT ROYALE DR N
CITY-ST-ZIP	FT LAUDERDALE, FL 33308
TITLE	TD
NAME	SCHWEITZER, CHARLES
STREET ADDRESS	3200 PORT ROYALE DR N
CITY-ST-ZIP	FT. LAUDERDALE, FL 33308
TITLE	SD
NAME	WIENER, ETHELIND
STREET ADDRESS	3200 PORT ROYALE DR N
CITY-ST-ZIP	FT. LAUDERDALE, FL 33308
TITLE	D
NAME	DI IORIO, ROCCO
STREET ADDRESS	3200 PORT ROYALE DRIVE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308

100000258095  
 03/10/05-80028-013 61.25

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: [Signature] 3/8/05 954-776-0233  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #