2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#765182

FILED Jul 22, 2005 Secretary of State

Entity Name: TOWER OAKS GLENN HOMEOWNERS ASSOCIATION INC.

urrent P	Principal Place of Business:	New Principal Place of Business:	
	RWOOD TRACE ILLE, FL 32607 US		
urrent M	lailing Address:	New Mailing Address:	
	43RD STREET ILLE, FL 32606 US		
	r: 59-2787419 FEI Number Applied For () nce with s. 607.193(2)(b), F.S., the corporation did	FEI Number Not Applicable () Certificate of Status Desired I not receive the prior notice.	()
lame and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:	
BOUGHAN	NINIANI NIIDAI		
511 SHE	NNAN, NIDAL PRIMOOD TRACE ILLE, FL 32607 US		
511 SHE SAINESVI	RWOÓD TRACE ILLE, FL 32607 US	e purpose of changing its registered office or registered agent, o	or both,
511 SHE SAINESVI	RWOOD TRACE ILLE, FL 32607 US e named entity submits this statement for the of Florida. RE:		or both,
511 SHE GAINESVI The above In the State	RWOOD TRACE ILLE, FL 32607 US e named entity submits this statement for the of Florida.		or both,
511 SHE GAINESVI The above In the State GIGNATUI	RWOOD TRACE ILLE, FL 32607 US e named entity submits this statement for the of Florida. RE:		
511 SHE GAINESVI The above In the State GIGNATUI	RWOOD TRACE ILLE, FL 32607 US e named entity submits this statement for the of Florida. RE: Electronic Signature of Registered.	Agent Date	
511 SHE GAINESVI The above In the State SIGNATUI DFFICER: itte: lame: ddress:	RWOOD TRACE ILLE, FL 32607 US e named entity submits this statement for the of Florida. RE: Electronic Signature of Registered. S AND DIRECTORS: D () Delete BOUGHANNAN, NIDAL 4511 SHERWOOD TRACE	Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRI Title: () Change () Addition Name: Address:	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: NIDAL BOUGHANNAM PRES 07/22/2005