

## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # F39541

1. Entity Name

TOWER RESORTS REALTY, INC.



Principal Place of Business 3015 N. OCEAN BLVD.

3015 N. OCEAN BLVD. SUITE 121

FT. LAUDERDALE, FL 33308

Mailing Address

3015 N. OCEAN BLVD.

SUITE 121

FT. LAUDERDALE, FL 33308

## FILED Apr 30, 2008 8:00 am Secretary of State

04-30-2008 90156 023 \*\*\*150.00

60032004



02132008 N

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2100332

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FOSTER, RA 3015 N OCEAN BLVD STE 121 FT LAUD, FL 33308

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8. The above the obligat	named entity submits this statement for the prions of registered agent.	urpose of changing its registe	red office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if			<del></del>	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Fina     Trust Fund Contribution	ancing	\$5.00 May Be Added to Fees	DATE
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP CITY-S1-ZIP	PSD OTTINO, J.P. III 3015 N. OCEAN BLVD., STE. 121 FT. LAUDERDALE, FL 33308  DVT LANDAU, MARC J 3015 N OCEAN BLVD STE 121 FORT LAUDERDALE, FL 33308  V/ RAUER, WILLIAM Christians 3015 N. OCEAN BLVD., SUITE 121 FORT LAUDERDALE, FL 33308			DO	NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP					THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-7IP					

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 by trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment frith an addless, with all other like empowered.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

J.T. OFTING

2 13 08

Date

Daytima Phone #