

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 13, 2006 8:00 am**  
**Secretary of State**

02-13-2006 90042 045 \*\*\*\*61.25

**DOCUMENT # N19042**

1. Entity Name  
ST. MARY TOWERS, INC.



Principal Place of Business

11410 N. KENDALL DR  
STE 201  
MIAMI, FL 33176 US

Mailing Address

11410 N. KENDALL DR  
STE 201  
MIAMI, FL 33176 US

**DO NOT WRITE IN THIS SPACE**



01182006 No Chg-NP CR2E037\_(11/05)

4. FEI Number  
59-2779192

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

FITZGERALD, J PATRICK, ESQUIRE  
110 MERRICK WAY  
SUITE 2-C  
CORAL GABLES, FL 33134

**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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD QUINLIVAN, J. M 5730 SW 74TH ST., STE 300 MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD ABELLO, EUGENE 6522 SW 136 CT MIAMI, FL 33183
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST SOMARRIBA, MARCOS REV 13401 NW 28TH AVE. OPA LOCKA, FL 33054
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/2006

Date

305.757.2824

Daytime Phone #