

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 758109

**FILED**  
**Jan 17, 2020**  
**Secretary of State**  
**6387071315CC**

**Entity Name:** SUMMIT TOWERS CONDOMINIUM ASSOCIATION, INC

**Current Principal Place of Business:**

1201 SOUTH OCEAN DRIVE  
HOLLYWOOD, FL 33019

**Current Mailing Address:**

1201 SOUTH OCEAN DRIVE  
HOLLYWOOD, FL 33019

**FEI Number:** 59-2132575

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SKRLD, INC.  
201 ALHAMBRA CIR.  
STE 1102  
CORAL GABLES, FL 33134 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VP  
Name SIMIONESCU, NICK  
Address 1201 S. OCEAN DR  
City-State-Zip: HOLLYWOOD FL 33019

Title DIRECTOR  
Name REILSER, MARYANN  
Address 1201 S. OCEAN DR  
City-State-Zip: HOLLYWOOD FL 33019

Title DIRECTOR  
Name BARONE, VITO  
Address 1201 S. OCEAN DR  
City-State-Zip: HOLLYWOOD FL 33019

Title SECRETARY  
Name SPIRO, SUSAN  
Address 1201 S OCEAN DR  
City-State-Zip: HOLLYWOOD FL 33019

Title PRESIDENT  
Name WERNER, ROBERT  
Address 1201 SOUTH OCEAN DRIVE  
City-State-Zip: HOLLYWOOD FL 33019

Title TREASURER  
Name COUTO, ALBERTO  
Address 1201 SOUTH OCEAN DRIVE  
City-State-Zip: HOLLYWOOD FL 33019

Title DIRECTOR  
Name BURG, BEATRICE  
Address 1201 SOUTH OCEAN DRIVE  
City-State-Zip: HOLLYWOOD FL 33019

Title DIRECTOR  
Name TAFFET, CELESTINE  
Address 1201 SOUTH OCEAN DRIVE  
City-State-Zip: HOLLYWOOD FL 33019

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*I hereby 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 all other like empowered.*

**SIGNATURE: ROBERT WERNER**

**PRESIDENT**

**01/17/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            GARVER, ESTHER  
Address        1201 SOUTH OCEAN  
City-State-Zip: HOLLYWOOD FL 33019