

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 760366

**Entity Name:** EAST PASS TOWERS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

100 GULF SHORE DR.  
DESTIN, FL 32541

**FILED**  
**Jan 21, 2015**  
**Secretary of State**  
**CC5539068401**

**Current Mailing Address:**

205 BROOKS STREET  
SUITE 201  
FORT WALTON BEACH, FL 32548 US

**FEI Number: 59-2579097**

**Certificate of Status Desired: No**

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

PROGRESSIVE MANAGEMENT OF AMERICA, INC.  
205 BROOKS STREET  
SUITE 201  
FORT WALTON BEACH, FL 32548 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: MICHAEL KENT**

**01/21/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SCHUESSLER, DAVID  
Address        205 BROOKS STREET  
                 SUITE 201  
City-State-Zip: FORT WALTON BEACH FL 32548

Title            VP  
Name            ROBINSON, DAVID  
Address        205 BROOKS STREET  
                 SUITE 201  
City-State-Zip: FORT WALTON BEACH FL 32548

Title            DIRECTOR  
Name            POWELL, ANDERSON  
Address        205 BROOKS STREET  
                 SUITE 201  
City-State-Zip: FORT WALTON BEACH FL 32548

Title            SECRETARY  
Name            STALVEY, AILEEN  
Address        205 BROOKS STREET  
                 SUITE 201  
City-State-Zip: FORT WALTON BEACH FL 32548

Title            TREASURER  
Name            FULTON, SAM  
Address        205 BROOKS STREET  
                 SUITE 201  
City-State-Zip: FORT WALTON BEACH FL 32548

*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: DAVID SCHUESSLER**

**PRESIDENT**

**01/21/2015**

Electronic Signature of Signing Officer/Director Detail

Date