

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

DOCUMENT# N00000005468

**Entity Name:** CITYPLACE TOWER CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 23, 2015**  
**Secretary of State**  
**CC7597977831**

**Current Principal Place of Business:**

651 OKEECHOBEE BLVD  
C/O MANAGEMENT  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

651 OKEECHOBEE BLVD  
C/O MANAGEMENT OFFICE  
WEST PALM BEACH, FL 33401

**FEI Number: 02-0726374**

**Certificate of Status Desired: No**

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

SACHS & SAX ATTORNEYS AT LAW  
6111 BROKEN SOUND PARKWAY NW  
SUITE 200  
BOCA RATON, FL 33487 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 P  
Name RUFFINO, ARTHUR S  
Address 651 OKEECHOBEE BLVD. #311  
City-State-Zip: WEST PALM BEACH FL 33401

Title VP  
Name FELICIA, ANTHONY  
Address 4899 THREADNEEDLE  
City-State-Zip: WILMINGTON DE 19807

Title DIRECTOR  
Name SPECTOR, DAVID  
Address 651 OKEECHOBEE BLVD.  
#1001  
City-State-Zip: WEST PALM BEACH FL 33401

Title SECRETARY  
Name NEWMAN, HELENE  
Address 651 OKEECHOBEE BLVD. #211  
City-State-Zip: WEST PALM BEACH FL 33401

Title TREASURER  
Name SCHNEIDER, ELAINE  
Address 651 OKEECHOBEE BLVD.  
#701  
City-State-Zip: WEST PALM BEACH FL 33401

*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: ARTHUR RUFFINO**

**PRESIDENT**

**03/23/2015**

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

\_\_\_\_\_  
Date