

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 25, 2008 8:00 am
Secretary of State

02-25-2008 90061 035 ****61.25

DOCUMENT # 706851

1. Entity Name

**TOWNE APARTMENTS ASSOCIATION INC. A
CONDOMINIUM**



Principal Place of Business

**1821 N. 17TH CT.
#21
HOLLYWOOD FL 33020
US**

Mailing Address

**1821 N. 17TH CT.
#21
HOLLYWOOD FL 33020
US**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2389456

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

1st MOORE

CR2E037 (10/07)



6. Name and Address of Current Registered Agent

**ANGELICA VITHOULKAS
1821 N. 17TH CT.
#22
HOLLYWOOD FL 33020**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reinstating)

DATE

**FILE NOW - FEE IS \$61.25
Due By May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTCM
ANGELICA VITHOULKAS
1821 N. 17TH CT. #22
HOLLYWOOD FL 33020** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
DIONYSIA S. VITHOULKAS
6106 CALL ST.
HOLLYWOOD FL 33024** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DSI
ROSA GINA VITHOULKAS
6320 ARTHUR ST.
HOLLYWOOD FL 33024** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ROSADO, JULIO
6320 ARTHUR ST
HOLLYWOOD FL 33024** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SCHUELLER, RHONDA
5705 LARPIN LANE
ALEXANDRIA VA 22310** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Apartment #21 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Angelica Vithoulkas* **2-13-08 9549204766**