

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714302

FILED
Apr 27, 2008
Secretary of State

Entity Name: THE TOWERS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

KEYS-CALDWELL, INC
1162 INDIAN HILLS BLVD
VENICE, FL 34293 US

New Principal Place of Business:

Current Mailing Address:

1162 INDIAN HILLS BLVD.
VENICE, FL 34293 US

New Mailing Address:

FEI Number: 59-1350738

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEYS CALDWELL, INC
1162 INDIAN HILLS BLVD.
VENICE, FL 34293 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PARKER, RAY
Address: 1150 TARPON CENTER DRIVE, #501
City-St-Zip: VENICE, FL 34285

Title: SD () Delete
Name: YOUNG, JENNY
Address: 1150 TARPON CENTER DR # 102
City-St-Zip: VENICE, FL 34285

Title: VD () Delete
Name: BOLTON, BILL
Address: 1150 TARPON CENTER DR # 701
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: THOMAS, MARLIN
Address: 1150 TARPON CTR DR #705
City-St-Zip: VENICE, FL 34285

Title: TD () Delete
Name: SCHACHT, RICHARD
Address: 1150 TARPON CENTER DRIVE #608
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: PAWLOWSKI, CAROLE
Address: 1150 TARPON CENTER DRIVE, #507
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RAY PARKER

PRES

04/27/2008

Electronic Signature of Signing Officer or Director

Date