


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2005 8:00 am
Secretary of State

05-27-2005 90024 019 ****61.25

DOCUMENT # 718995

1. Entity Name
EMERALD TOWER ASSOCIATION, INC.



Principal Place of Business
**1401 SOUTH OCEAN BLVD
 POMPANO BEACH, FL 33062**

Mailing Address
**1401 SOUTH OCEAN BLVD
 POMPANO BEACH, FL 33062**

40086158



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

05192005 Chg-NP CR2E037 (10/03)

City & State

4. FEI Number
59-1419717

Applied For
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

RUMIN, EDWARD
2500 NORTH FEDERAL HWY. # 201
FT. LAUDERDALE, FL 33310-6057

7. Name and Address of New Registered Agent

Name **Edward R. Rumin**
 Street Address (P.O. Box Number is Not Acceptable)
2755 East Oakland Park Blvd
Fort Lauderdale, Fla. 33306
 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by September 7, 2005

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	P	<input type="checkbox"/> Delete
NAME	TEAZICH, JOEL	<i>Same this year 2005</i>
STREET ADDRESS	1401 SOUTH OCEAN DR	
CITY-ST-ZIP	POMPANO BEACH, FL 33062	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	WILSON, JOHN	
STREET ADDRESS	1401 SOUTH OCEAN BLVD.	
CITY-ST-ZIP	POMPANO BEACH, FL 33062	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	PANKRATZ, HERBERT	
STREET ADDRESS	1401 SOUTH OCEAN DR	
CITY-ST-ZIP	POMPANO BEACH, FL 33062	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	TROUT, VALLERIE	
STREET ADDRESS	1401 SOUTH OCEAN DR	
CITY-ST-ZIP	POMPANO BEACH, FL 33062	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PANKRATZ, HERBERT	
STREET ADDRESS	1401 SOUTH OCEAN BLVD.	
CITY-ST-ZIP	POMPANO BEACH, FL 33062	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	WILSON, JOHN	
STREET ADDRESS	1401 SOUTH OCEAN DR	
CITY-ST-ZIP	POMPANO BEACH, FL 33062	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Rudy Roder	
STREET ADDRESS	1401 S. Ocean Blvd.	
CITY-ST-ZIP	POMPANO BEACH, FL. 33062	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Irwine Feigenbaum	
STREET ADDRESS	1401 S. Ocean Blvd.	
CITY-ST-ZIP	POMPANO BEACH, FL. 33062	
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Donna Harkins	
STREET ADDRESS	1401 S. Ocean Blvd.	
CITY-ST-ZIP	POMPANO BEACH, FL. 33062	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jim Vietmeier	
STREET ADDRESS	1401 S Ocean Blvd.	
CITY-ST-ZIP	POMPANO BEACH FL 33062	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dennis Petretti	
STREET ADDRESS	1401 S. Ocean Blvd.	
CITY-ST-ZIP	POMPANO BEACH, Fla - 33062	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Joel Teazich* DATE: *May 25, 2005*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #