

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723960

FILED
Jan 03, 2007
Secretary of State

Entity Name: DOLPHIN TOWERS CONDOMINIUM ASSOCIATION, INC

Current Principal Place of Business:

101 S GULFSTREAM AVE
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

101 S GULFSTREAM AVE
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 59-1429696 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MOWERY, KRISTINE L
101 S GULFSTREAM AVE
DOLPHIN TOWER OFFICE
SARASOTA, FL 34236 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: P () Delete
Name: COLACICCO, SUE
Address: 101 S GULFSTREAM AVE #6-B
City-St-Zip: SARASOTA, FL 34236

Title: V () Delete
Name: LEINBERGER, CARL
Address: 101 S GULFSTREAM AVE #14-K
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: FOSSELMAN, DONALD
Address: 101 S GULFSTREAM AVE #15-F
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: RAETZ, CHRIS
Address: 101 S GULFSTREAM AVE #9-A
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: HANKE, DELFORD
Address: 101 S GULFSTREAM AVE #14-F
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: SILVER, IRENE
Address: 101 S GULFSTREAM AVE #8-E
City-St-Zip: SARASOTA, FL 34236

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 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: KRISTINE L. MOWERY

MGR

01/03/2007

Electronic Signature of Signing Officer or Director

Date