## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED MARKET SIGNAND

## Aug 30, 2005 8:00 am Secretary of State **DOCUMENT # 727234** 1. Entity Name 08-30-2005 90029 049 \*\*\*\*70.00 TOWER FORTY ONE ASSOCIATION, INC. Principal Place of Business Mailing Address 4101 PINETREE DR MGMT OFFICE MIAMI BEACH FL 33140 4101 PINETREE DR MGMT OFFICE MIAMI BEACH FL 33140 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 2nd MOORE CR2E037 (5/05) Applied For City & State City & State 4. FEI Number 59-1497018 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HO11AKOFF HYMAN, KAPLAN, GANGUZZA, SPECTOR&MARS no Box Number is Not Acceptable) MUSEUM TOWER, 27TH FL 150 WEST FLAGLER ST **MIAMI FL 33130** 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 ne of registered agent and title if applicable FILE NOW: FEE IS \$61.25 \$5.00 May Be 9. Election Campaign Financing Make Check Payable to Trust Fund Contribution, Due By September 7, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITLE RINGLER, SHAUL Delete TITLE ☐ Addition 4101 PINETREE DRIVE MGMT OFFICE NAME NAME STREET ADDRESS MIAMI BCH FL 33140 STREET ADDRESS CITY-ST-7IP CITY-ST-7IP HARVEY HEIND X Change Iddition HARVEY HEIND SINE MGMT OFFICE: MEYER, ARNOLD TITLE 🛕 Delete TITEE 4101 PINETREE DRIVE MGMT OFFICE NAME NAME STREET ADDRESS MIAMI BCH FL 33140 STREET ADDRESS MIAMI BEACH FI 33140 CITY-ST-ZIP CITY-ST-ZIP Defete Change TITLE CASTELLON, CAMILO TITLE Robert Stein NAME 4101 PINETREE DRIVE MGMT OFFICE NA ME 4101 Pine TREE DRIVE. MGMT. OFFICE STREET ADDRESS STREET ADDRESS MIAMI BCH FL 33140 CITY-ST-ZIP CITY-ST-7IP MIAMI BEACH, Pl 33140 BEYLUS, LEON HEARY Coelman Drive - m6mT. office Delete TITLE THTLE 4101 PINETREE DRIVE MGMT OFFICE NAME NAME MIAMI BCH FL 33140 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP minmi Bench M. 33140 CITY-ST-7IP FISHBEAN, EVELYN GENET TITLE THTLE Change Addition Delete DIVECTOR 4101 PINE TREE DR MGMT OFFICE Alexander Be NAME DRIVE - MGMT. Office MIAMI BEACH FL 33140 STREET ADDRESS STREET ADDRESS 4101 Pine The CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE DIRECTOR Change ☐ Addition DRIVE MEMT Office NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 33140 CITY-ST-ZIP 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 the 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.

CER OR DIRECTOR

KECEINED VOC S S 5002

Daytime Phone #

**FILED**