

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

FILED
Feb 02, 2005 8:00 am
Secretary of State

02-02-2005 90047 005 ****61.25

DOCUMENT # 729662

1. Entity Name
COUNTRY CLUB TOWERS ASSOCIATION, INC.

Principal Place of Business
**2500 NE 48TH LANE
 FT. LAUDERDALE FL 33308**

Mailing Address
**2500 NE 48TH LANE
 FT. LAUDERDALE FL 33308**

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

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

City & State
 City & State

Zip Country Zip Country



40011138



1st MOORE CR2E037 (10/04)

4. FEI Number **59-1651130** Applied For Not Applicable

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

6. Name and Address of Current Registered Agent
**POLIAKOFF, GARY A., ESQ.
 3111 STIRLING ROAD
 BOX 9057
 FT. LAUDERDALE FL 33310-6057**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25
Due By May 1, 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GRIFFITH, MARTHA 2500 NE 48 LANE #410 FT. LAUDERDALE FL 33308 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KUBICHAN, CARYN 2500 NE 48 LANE #708 FT. LAUDERDALE FL 33308 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD KUBICHAN, CARYN 2500 NE 48TH LANE, #708 FT. LAUDERDALE FL 33308 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Chisholm, Earle 2500 NE 48th Lane #302 FT. LAUDERDALE FL 33308 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORRIS, ROLAND B 2500 NE 48TH LANE, #309 FT. LAUDERDALE FL 33308 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JD STONE, Joyce 2500 NE 48th Lane #203 FT. LAUDERDALE FL 33308 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS STONE, JOYCE 2500 NE 48 LANE #203 FT. LAUDERDALE FL 33308 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SO HENDERSON, KATHLEEN 2500 NE 48th Lane #704 FT. LAUDERDALE FL 33308 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MICA, MICHAEL 2500 NE 48 LANE #408 FORT LAUDERDALE FL 33308 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PINHAS, WILLIAM R 2500 NE 48th Lane #407 FT. LAUDERDALE FL 33308 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD COMBS, JOHN 2500 NE 48TH LANE, #703 FORT LAUDERDALE FL 33308 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D John Combs 2500 NE 48th Lane #703 FT. LAUDERDALE, FL 33308 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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: *[Signature]* **EARLE Chisholm** 1-27-05 954-771-7641
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Vice Pres Date Daytime Phone #

ATTACHMENT

40011138

#729662

Block 11 - Continued

TITLE ID

Change ADD IT

NAME Edwards, George

Address 2500 NE 48th Lane #501

City-Str-Zip Ft Lauderdale FL 33308