2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2006 8:00 am
Secretary of State
05-09-2006 90087 010 ****61.25

DOCUMENT # 737400

1. Entity Name
GABRIEL TOWERS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
801 N OCEAN BLVD. POMPANO BEACH, FL 33062 US	801 N OCEAN BLVD. POMPANO BEACH, FL 33062 US

04202006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2066697 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SHAPIRO, PAUL 2711 TREASURE COVE CIRCLE FT LAUDERDALE, FL 33312	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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

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 ESTRELLA, NATASCHA 801 N OCEAN BLVD. # 404 POMPANO BEACH, FL 33062	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Theresa Norris 801 N. OCEAN BLVD. #404 POMPANO BEACH, FL. 33062	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S TOMAN, FRANK 801 N. OCEAN BLVD #604 POMPAN BEACH, FL 33062	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP JUDY GOTTHOFFER 801 N. OCEAN BLVD. #704 POMPANO BEACH FL 33062	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILORA, MARIE B 801 N. OCEAN BLVD #401 POMPANO BEACH, FL 33062	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STALEY, JIM 801 N. OCEAN BLVD #203 POMPANO BEACH, FL 33062	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Theresa Norris Theresa Norris Treas. 954-784-3085
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #