

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 739915

1. Entity Name

TWIN TOWERS HOMEOWNERS ASSOCIATION, INC.

FILED
Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90117 002 ****61.25

Principal Place of Business

Mailing Address

2020 N. ATLANTIC AVENUE
COCOA BEACH FL 32931

2020 N. ATLANTIC AVENUE
COCOA BEACH FL 32931-3347

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1893920

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

7. Name and Address of New Registered Agent

JONES, L W
2020 N ATLANTIC AVE 217N
COCOA BEACH FL 32931

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	☒ Delete
NAME	SCHRUM, DONALD	
STREET ADDRESS	580 S BREVARD AVE #836	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE	SD	☐ Delete
NAME	GILLEY, JOAN	
STREET ADDRESS	2020 N ATLANTIC AVE	
CITY-ST-ZIP	COCOA BEACH FL	
TITLE	PTD	☒ Delete
NAME	HOUGHTON, VICTOR	
STREET ADDRESS	2020 N. ATLANTIC AVE.	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE	VD	☒ Delete
NAME	BRIDGMAN, ELAINE	
STREET ADDRESS	2020 N ATLANTIC AVE	
CITY-ST-ZIP	COCOA BEACH FL	
TITLE	VD	☐ Delete
NAME	WAUCHTER, GERALD	
STREET ADDRESS	2020 N ATLANTIC AVE	
CITY-ST-ZIP	COCOA BEACH FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	TD	☐ Change ☒ Addition
NAME	McCain, George	
STREET ADDRESS	2020 N. Atlantic Ave.	
CITY-ST-ZIP	Cocoa Beach, FL 32931	
TITLE	PD	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SD	☐ Change ☒ Addition
NAME	Maynard, David	
STREET ADDRESS	2020 N. Atlantic Ave.	
CITY-ST-ZIP	Cocoa Beach, FL 32931	
TITLE	VD	☐ Change ☒ Addition
NAME	Barry, Joyce	
STREET ADDRESS	2020 N. Atlantic Avenue	
CITY-ST-ZIP	Cocoa Beach, FL 32931	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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 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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Gerald Wauchter 2/28/00 321-783-2435

CR2E037 (9/99)