

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742618

FILED
Apr 22, 2009
Secretary of State

Entity Name: GALT TOWERS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4250 GALT OCEAN DRIVE
FT. LAUDERDALE, FL 33308 US

New Principal Place of Business:

Current Mailing Address:

4250 GALT OCEAN DRIVE
FT. LAUDERDALE, FL 33308 US

New Mailing Address:

FEI Number: 36-2993571 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIARAMONTE, JOE
4250 GALT OCEAN DR
APT 145
FT. LAUDERDALE, FL 33308 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: PD () Delete
Name: SONGER, KEVIN
Address: 4250 GALT OCEAN DR. #10T
City-St-Zip: FT. LAUD., FL 33308

Title: VD () Delete
Name: DALLY, ROBERT
Address: 4250 GALT OCEAN DR. #9M
City-St-Zip: FT. LAUD., FL 33308

Title: TD () Delete
Name: MARCUS, STEVE
Address: 4250 GALT OCEAN DR #2B
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: SD () Delete
Name: CHIARAMONTE, JOE
Address: 4250 GALT OCEAN DR #145
City-St-Zip: FT. LAUD., FL 33308

Title: PD () Delete
Name: POWELL, RONALD
Address: 4250 GALT OCEAN DR #4N
City-St-Zip: FT. LAUD., FL 33308

Title: ATD () Delete
Name: SPERLING, JOANNE
Address: 4250 GALT OCEAN DR #11F
City-St-Zip: FT. LAUD., FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: ATD (X) Change () Addition
Name: BAYER, CATHERINE
Address: 4250 GALT OCEAN DR #10R
City-St-Zip: FT. LAUD., FL 33308

I hereby certify that the information supplied with this filing does not qualify 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: KEVIN SONGER

P

04/22/2009

Electronic Signature of Signing Officer or Director

_____ Date