

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 11, 2003 8:00 am
Secretary of State

04-11-2003 90228 032 ****61.25

UBR125

DOCUMENT # 742618

1. Entity Name
GALT TOWERS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**4250 GALT OCEAN DRIVE
FT. LAUDERDALE FL 33308
US**

Mailing Address
**4250 GALT OCEAN DRIVE
FT. LAUDERDALE FL 33308
US**

2. Principal Place of Business
Suite, Apt. #, etc.
City & State

3. Mailing Address
Suite, Apt. #, etc.
City & State

Zip Country Zip Country

4. FEI Number **36-2993571** Applied For
 Not Applicable

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



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
**SONGER, KEVIN
4250 GALT OCEAN DR.
FT. LAUDERDALE FL 33308**

7. Name and Address of New Registered Agent
Name ~~Robert C. Dally~~
Street Address (P.O. Box Number is Not Acceptable)
4250 Galt Ocean Drive #9M
City **Ft. Lauderdale** FL Zip Code **33308**

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 *Robert C. Dally* secretary DATE **4-8-03**
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

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	
TITLE PD NAME MOSES, GALLY STREET ADDRESS 4250 GALT OCEAN DR CITY-ST-ZIP FORT LAUDERDALE FL 33308	<input checked="" type="checkbox"/> Delete
TITLE PD NAME SONGER, KEVIN STREET ADDRESS 4250 GALT OCEAN DR CITY-ST-ZIP FORT LAUDERDALE FL 33308	<input type="checkbox"/> Delete
TITLE PD NAME YUSIM, SHELDON STREET ADDRESS 4250 GALT OCEAN DR CITY-ST-ZIP FORT LAUDERDALE FL 33308	<input type="checkbox"/> Delete
TITLE PD NAME LIBRETELLA, ADAM STREET ADDRESS 4250 GALT OCEAN DRIVE CITY-ST-ZIP FT LAUDERDALE FL 33308	<input checked="" type="checkbox"/> Delete
TITLE ATD NAME PESCOSOLIDO, JOHN STREET ADDRESS 4250 GALT OCEAN DR CITY-ST-ZIP FORT LAUDERDALE FL 33308	<input type="checkbox"/> Delete
TITLE PS NAME PLAUT, RICHARD STREET ADDRESS 4250 GALT OCEAN DRIVE CITY-ST-ZIP FORT LAUDERDALE FL 33308	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD NAME Kevin Songer STREET ADDRESS 4250 Galt Ocean Dr. CITY-ST-ZIP Ft. Laud., FL 33308	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VD NAME Constabile D'Amico STREET ADDRESS 4250 Galt Ocean Dr. #12S CITY-ST-ZIP Ft. Laud., FL 33308	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE FSD NAME Sheldon Yusim STREET ADDRESS 4250 Galt Ocean Dr. #11A CITY-ST-ZIP Ft. Laud., FL 33308	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE SD NAME Robert C. Dally STREET ADDRESS 4250 Galt Ocean Dr. #9M CITY-ST-ZIP Ft. Laud., FL 33308	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE ATD NAME Herbert Kwart STREET ADDRESS 4250 Galt Ocean Dr: #15T CITY-ST-ZIP Ft. Laud., FL 33308	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE TD NAME John Pescosolido STREET ADDRESS 4250 Galt Ocean Dr. #15B CITY-ST-ZIP Ft. Laud., 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 REQUIRED** **4-8-03** **954-563-9268**

CR2E037 (10/02)