2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 08:00 AM
Secretary of State

DOCUMENT # 744739

1. Entity Name
CONDOMINIUM ASSOCIATION OF DRAKE TOWER, INC.

Principal Place of Business	Mailing Address
1800 N. ANDREWS AVE. FT. LAUDERDALE, FL 33311	1800 N. ANDREWS AVE. FT. LAUDERDALE, FL 33311

04112007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1875030
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

TRITTO, PERRY
1800 N ANDREWS AVE # 6-D
FT. LAUDERDALE, FL 33311

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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)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GOTTLIEB, GRACE
STREET ADDRESS	1800 N ANDREWS AVE 11K
CITY-ST-ZIP	FT. LAUDERDALE, FL 33311
TITLE	T
NAME	WEBB, GREG
STREET ADDRESS	1800 N ANDREWS AVE 2H
CITY-ST-ZIP	FORT LAUDERDALE, FL 33311
TITLE	S
NAME	TRITTO, PERRY
STREET ADDRESS	1800 N ANDREWS AVE 6-D
CITY-ST-ZIP	FORT LAUDERDALE, FL 33311
TITLE	PD
NAME	TALBOT, TIMOTHY
STREET ADDRESS	1800 N ANDREWS AVE, # 7 G
CITY-ST-ZIP	FT. LAUDERDALE, FL 33311
TITLE	V
NAME	WYMAN, SCOTT
STREET ADDRESS	1800 N ANDREWS AVE PHJ
CITY-ST-ZIP	FT. LAUDERDALE, FL 33311
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000712424
04/26/07-80045-017 61.25

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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: President 4-12-07 954-763-1205
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #