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

FILED
Jan 13, 2003 8:00 am
Secretary of State
01-13-2003 90685 016 ****61.25

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

☐ CHECK HERE IF MAKING CHANGES

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 59-1875030 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

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

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CAVANAUGH, PATRICK 1800 N ANDREWS AVE 7-I FT. LAUDERDALE FL 33311	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Jameson Maroncelli 1800 N. Andrews Ave 11F Ft. Lauderdale FL 33311 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T POWELL, DR W ALLEN 1800 N ANDREWS 11-E FORT LAUDERDALE FL 33311	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T greg webb 1800 N. Andrews Ave 2H Ft. Lauderdale FL 33311 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S TRITTA, PERRY 1800 N ANDREWS AVE 6-D FORT LAUDERDALE FL 33311	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Tritto, Terry 1800 N. Andrews Ave 6D Ft. Lauderdale FL 33311 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TALBOT, TIMOTHY 1800 N ANDREWS AVE, # 7 G FT. LAUDERDALE FL 33311	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Board of Director Scott Wyman 1800 N. Andrews Ave PHJ Ft. Lauderdale FL 33311 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP CUNNINGHAM, JAMES 1800 N ANDREWS AVE 12-B FT. LAUDERDALE FL 33311	☑ 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

CR2E037 (10/02)

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: Jameson Maroncelli V.P. 1-10-03 954 763-1245
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR