

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90111 005 ****61.25

DOCUMENT # 748358
 1. Entity Name
R. H. TOWERS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
1215 E. HILLSBORO BLVD **1215 E. HILLSBORO BLVD**
DEERFIELD BEACH FL 33441 **DEERFIELD BEACH FL 33441**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 Zip Country Zip Country



1st MOORE CR2E037 (10/04)

6. Name and Address of Current Registered Agent
CAMPBELL PROPERTY MGMT.
1215 E. HILLSBORO BLVD
DEERFIELD BEACH FL 33441

4. FEI Number Applied For
59-1928306 Not Applicable

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 _____ (NOTE Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2005 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	PD	<input checked="" type="checkbox"/> Delete	TITLE	VP-D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SCALZO, DON		NAME	SETARO, GERALDINE	
STREET ADDRESS	401 N. FEDERAL HWY		STREET ADDRESS	410 N. FEDERAL HWY #117	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441		CITY-ST-ZIP	DEERFIELD BEACH, FL 33441	
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GROAT, LEATRICE		NAME	MULDER, ANNE E.	
STREET ADDRESS	400 N. FEDERAL HWY #408		STREET ADDRESS	390 N. FEDERAL HWY #307	
CITY-ST-ZIP	DEERFIELD BCH FL 33441		CITY-ST-ZIP	DEERFIELD BEACH, FL 33441	
TITLE	TD	<input type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	UNGER, BERTRAM		NAME		
STREET ADDRESS	390 N. FEDERAL HWY #305		STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH FL 33441		CITY-ST-ZIP		
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	OWENS, RICHARD		NAME	RATINAUD, JEAN PIERRE	
STREET ADDRESS	400 N. FEDERAL HWY #510		STREET ADDRESS	410 N FEDERAL HWY #516	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441		CITY-ST-ZIP	DEERFIELD BEACH, FL 33441	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KAINOL, ALBERT		NAME	REYNOLDS, ROGER	
STREET ADDRESS	390 N. FEDERAL HWY #307		STREET ADDRESS	410 N FEDERAL HWY #319	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441		CITY-ST-ZIP	DEERFIELD BEACH, FL 33441	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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 all other like empowered.

SIGNATURE: **BERTRAM B. UNGER, PRES.** 4/7/05 561-992-8446
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #