

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

1121

**FILED**  
**Feb 15, 2008 8:00 am**  
**Secretary of State**

02-15-2008 90015 035 \*\*\*\*61.25

**DOCUMENT # 748358**

1. Entity Name  
**R. H. TOWERS CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business  
**400 N. FEDERAL HWY.  
 DEERFIELD BEACH FL 33441**

Mailing Address  
**400 N. FEDERAL HWY.  
 DEERFIELD BEACH FL 33441**

2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State

City & State

Zip Country Zip Country



1st MOORE CR2E037 (10/07)

4. FEI Number  
**59-1928306**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
**RIVER HOUSE TOWERS  
 400 N. FEDERAL  
 DEERFIELD BEACH FL 33441**

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**  
**Due By May 1, 2008**

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	<b>D</b> <b>MC GEE, DORIS</b> <b>390 NORTH FEDERAL HWY #504</b> <b>DEERFIELD BEACH FL 33441</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TREAS</b> <b>GINO SACCOCCIO</b> <b>400 N. FEDERAL HWY - #211</b> <b>DEERFIELD BEACH, FL 33441</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>MULDER, ANNE E</b> <b>390 N FEDERAL HWY #307</b> <b>DEERFIELD BCH FL 33441</b> SAME	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SECY</b> <b>EVA MARGIOTTA</b> <b>400 N. FEDERAL HWY #314</b> <b>DEERFIELD BEACH, FL 33441</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>UNGER, BERTRAM</b> <b>390 N. FEDERAL HWY #305</b> <b>DEERFIELD BEACH FL 33441</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ASSIST. TREAS. &amp; RECORDING SECY</b> <b>MARIE CORRIN</b> <b>410 N. FEDERAL HWY - #621</b> <b>DEERFIELD BEACH, FL 33441</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD</b> <b>RATINALID, JEAN PIERRE</b> <b>410 N FEDERAL HWY #516</b> <b>DEERFIELD BEACH FL 33441</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DIR.</b> <b>LYNN ROSS</b> <b>390 N. FEDERAL HWY - #102</b> <b>DEERFIELD BEACH, FL 33441</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VTRE VICE PRES</b> <b>CODISPODO, STEPHEN</b> <b>400 NORTH FEDERAL HWY #612</b> <b>DEERFIELD BEACH FL 33441</b> REMAINS	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Anne Mulder* 1/29/08 954.596.4990