

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

FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90022 011 ****61.25

DOCUMENT # 751652

1. Entity Name

TIDES TOWNHOMES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

3824 N.E. 166 ST.
NO MIAMI BCH FL 33160

Mailing Address

3824 N.E. 166 ST.
NO MIAMI BCH FL 33160

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-0856194

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**



1st MOORE

CR2E037 (10/04)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~WILLIAMS, RUTH
3772 NE 166 STREET
NORTH MIAMI BEACH FL 33160~~

Name

Frank Reda

Street Address (P.O. Box Number is Not Acceptable)

3720 NE 106 ST

City

N MIA BCH

FL

Zip Code

33160

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, 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 P
NAME WILLIAMS, RUTH A ☒ Delete
STREET ADDRESS 3772 NE 166 STREET
CITY-ST-ZIP NORTH MIAMI BEACH FL 33160

TITLE P ☐ Change ☒ Addition
NAME Frank Reda
STREET ADDRESS 3720 NE 106 St.
CITY-ST-ZIP North miami beach FL 33160

TITLE TD ☒ Delete
NAME DUGGAN, BARBARA
STREET ADDRESS 3814 NE NOLE ST
CITY-ST-ZIP NORTH MIAMI BEACH FL 33160

TITLE TD ☐ Change ☒ Addition
NAME Peter Salas
STREET ADDRESS 3762 NE 166 St
CITY-ST-ZIP NMB, FL 33160

TITLE S ☐ Delete
NAME HORNER, SHANA
STREET ADDRESS 3720 NE 166 ST
CITY-ST-ZIP N MIA BCH FL 33160

TITLE S ☒ Change ☐ Addition
NAME Shana Horner
STREET ADDRESS 3720 NE 106 St
CITY-ST-ZIP N MIA BCH, FL 33160

TITLE V ☐ Delete
NAME BRUNETTO, RUSS
STREET ADDRESS 3720 NE 166 ST
CITY-ST-ZIP NORTH MIAMI BEACH FL 33160

TITLE V ☒ Change ☐ Addition
NAME RUSS BRUNETTO
STREET ADDRESS 3822 NE 106 St
CITY-ST-ZIP N MIA BCH, FL 33160

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Board member
STREET ADDRESS Ruth A Williams
CITY-ST-ZIP 3772 NE 166 St
NMB, FL 33160

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

Frank Reda

2/7/05

305-379-2100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #