

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 02, 2004 8:00 am**  
**Secretary of State**

04-02-2004 90046 038 \*\*\*\*61.25

**DOCUMENT # 756416**

1. Entity Name

OCEAN TOWERS UTILITIES CORPORATION, INC.



Principal Place of Business

Mailing Address

9400 SOUTH OCEAN DRIVE  
JENSEN BEACH FL 34957

9400 SOUTH OCEAN DRIVE  
JENSEN BEACH FL 34957

2. Principal Place of Business

3. Mailing Address

P.O. BOX 6002

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

JENSEN BEACH FL

Zip

Country

Zip

Country

34957



MOORE

CR2E037 (11/03)

4. FEI Number

59-2467850

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORNETT, JANE L., ESQ.  
401 EAST OSCEOLA STREET  
STUART FL 34994

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, 2004**

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 VPD  
NAME CRECCO, NICHOLAS ☐ Delete  
STREET ADDRESS 9400 S OCEAN DRIVE  
CITY-ST-ZIP JENSEN BEACH FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD  
NAME VILLANAVE, DON ☐ Delete  
STREET ADDRESS 10044 SOUTH OCEAN DRIVE  
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME FIELDS, RAYMOND ☐ Delete  
STREET ADDRESS 9401 SOUTH OCEAN DRIVE  
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S  
NAME CASSATA, PETER ☐ Delete  
STREET ADDRESS 9490 S OCEAN DRIVE  
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE PD  
NAME PISANO, FRANK ☐ Delete  
STREET ADDRESS 9417 S OCEAN DR  
CITY-ST-ZIP JENSEN BCH FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 Pisan*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/04 772  
567-229-2036  
Date Daytime Phone #