

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771209

FILED
Mar 25, 2009
Secretary of State

Entity Name: MERRITT TOWERS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1980 N ATLANTIC #701
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

1980 N ATLANTIC #701
COCOA BEACH, FL 32931

New Mailing Address:

FEI Number: 59-2525798

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, PETEY
1980 N ATLANTIC AVE
SUITE 701
COCOA BEACH, FL 32931 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: MIKULSKI, STEVE
Address: 200 S. SYKES CREEK PKWY #610
City-St-Zip: MERRITT ISLAND, FL 32952

Title: SD () Delete
Name: FUBLINGER, GLENICE
Address: 250 S SYLES PKWY #605
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D () Delete
Name: DRINKWATER, ANNA
Address: 200 S SYKES CREEK PKWY 507
City-St-Zip: MERRITT ISLAND, FL 32952

Title: PD () Delete
Name: DARIA, BOB
Address: 200 SYKES CREEK PKWY #501
City-St-Zip: MERRITT ISLAND, FL 32952

Title: T () Delete
Name: CRAWFORD, PAT
Address: 300 S. SYKES CREEK PKWY #505
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D () Delete
Name: COTTANI, LOUIS
Address: 200 S SKYES CREEK PKWY
City-St-Zip: MERRITT ISLAND, FL 32952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BOB DARIA

PD

03/25/2009

Electronic Signature of Signing Officer or Director

Date