

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000130

FILED
Feb 03, 2009
Secretary of State

Entity Name: TOWLES PLAZA EAST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

25494 SHORE DRIVE
PUNTA GORDA, FL 33950

New Principal Place of Business:

6101 DUNCAN RD
105
PUNTA GORDA, FL 33950 US

Current Mailing Address:

PO BOX 511316
PUNTA GORDA, FL 339511316

New Mailing Address:

6101 DUNCAN RD
105
PUNTA GORDA, FL 33950 US

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WOTITZKY, EDWARD L
223 TAYLOR STREET
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

TOWLES, TIMOTHY B
6101 DUNCAN RD
105
PUNTA GORDA, FL 33950 US

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: TIMOTHY B. TOWLES

02/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: TOWLES, TIMOTHY B
Address: 25494 SHORE DRIVE
City-St-Zip: PUNTA GORDA, FL 33950

Title: VPSD () Delete
Name: MICHALSKI, AMY
Address: 3900 TAYLOR ROAD
City-St-Zip: PUNTA GORDA, FL 33950

Title: D () Delete
Name: TOWLES, KEITH B
Address: 4900 RIVERSIDE DRIVE
City-St-Zip: PUNTA GORDA, FL 33950

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:

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: TIMOTHY B. TOWLES

MR

02/03/2009

Electronic Signature of Signing Officer or Director

Date