2005 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # N21/21 ATHE STATE OF



1. Entity Name TOWNES OF SOUTH ASSOCIATION, INC.				2-18-2005 9	90067 012	****61.2	.5			
Principal Place of Business 901 N LAKE DESTINY DR STE 110 MAITLAND, FL 32751 US Mailing Address 901 N LAKE DESTINY DR STE 110 MAITLAND, FL 32751			,			8 8 5 8 6 6 1				
2. Principal Place of Business 3.		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01252005	Chg-NP	CR2E00	37 (10/03)		
City & State		City & State			4. FEI Number 59-2943463				plied For at Applicable	
Zip C	ountry Zig	Zip Cour		5. Certificate of Sta		Status Desired	atus Desired			
6. Name and	Address of Current Registers	d Agent			7. Name and A	ddress of New	Registered /	Agent		
Wicho Boning			Name-		-, ·	·			**	
WEBB, ROBIN L 901 N LAKE DESTINY DR STE 110			Street A	Street Address (P.O. Box Number is Not Acceptable)						
MAITLAND, FL 32751			0					I ·		
			City	City			FŁ	Zip Code	e	
8. The above named entity sub- the obligations of registered a		ose of changing its re	egistered office o	r registere	d agent, or both	, in the State of I	Florida. I am	familiar with,	and accept	
SIGNATURE	ed name of registered agent and little if app	olicable. (NOTE: F	Registered Agent signal	rure required w	hen reinstating)		DATE	*	<u> </u>	
Filing Fee Is \$61.25 9. Election Campa		(1) 1 14 × 1				 				
			paign Financing	п 5	5.00 May Be		Make checi			
Due by May	, 2005	Trust Fund Co	paign Financing ntribution.	4 تا	Added to Fees	Fi	orida Depar	tment of St	tate	
Due by May		Trust Fund Co	ntribution.	4 تا	55.00 May Be Added to Fees ODITIONS/CHAI	Fi	orida Depar	RECTORS IN	tate	
10. VPD	OFFICERS AND DIRECTORS	Trust Fund Co	paign Financing ntribution. 11. ItiLE	D A	Added to Fees	NGES TO OFFIC	orida Depar	tment of St	tate	
10. TITLE VPD NAME DELIA, FRANK	OFFICERS AND DIRECTORS	Trust Fund Co	nation Financing ntribution. 11. TITLE NAME	D Thomp	odded to Fees Diffions/CHAP	NGES TO OFFIC	orida Depar	RECTORS IN	tate	
10. TITLE- VPD NAME DELIA, FRANK STREET ADDRESS 4802 BRIGHTO	OFFICERS AND DIRECTORS ON TERRACE	Trust Fund Co	naign Financing ntribution. 11. ITILE NAME STREET ADDRESS	D Thomp	DDITIONS/CHAIR Son, Jam Normandy	NGES TO OFFIC NES Place	orida Depar	RECTORS IN	tate	
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Due by May 10. IIILE VPD NAME DELIA, FRANK 4802 BRIGHTO ORLANDO, FL TITLE D NAME DORSAY, PAL STREET ADDRESS 4613 GATE PL CITY-SI-ZIP ORLANDO, FL	OFFICERS AND DIRECTORS ON TERRACE 32811	Trust Fund Co	align Financing ntribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Thomp 4825 Orlan D Hunte 4821	DOTTIONS/CHAINSON, James Normandy do, FFL or, Scott Normandy	Place Place	orida Depar	RECTORS IN Change	I 10 Addition Addition	
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Indicated on this report or supplied with this find coes not quality for the exemption stated in Section 119.07(3)(1), 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.

Arin Gullett

2/3/05

467-617-5290

Daytime Phone #