

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2006 08:00 AM
Secretary of State

DOCUMENT # N24098

1. Entity Name
M B TOWERS HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**1970 NE 3RD ST
DEERFIELD BEACH, FL 33441**

Mailing Address
**1970 NE 3RD ST
DEERFIELD BEACH, FL 33441**



03252006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-4404577

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fees Required**

6. Name and Address of Current Registered Agent

**HORKHEIMER, KEVIN
1970 NE 3RD ST
DEERFIELD BEACH, FL 33441**

**DO NOT WRITE
IN THIS SPACE**

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]*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when retreating)

DATE

3-27-06

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

1000000483471

04/11/06-80123-005 61.25

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
HORKHEIMER, KEVIN
1970 NE 3RD ST
DEERFIELD BEACH, FL 33441**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
GIBSON, SEAN
1968 NW 3RD ST
DEERFIELD BEACH, FL 33441**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
STONE, JEFF
1976 NE 3RD ST.
DEERFIELD BEACH, FL 33441**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-27-06

Date

Daytime Phone #