2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 14, 2008 8:00 am
Secretary of State
02-14-2008 90067 001 ****61.25
02-14-2008 90067 002 *****8.75

DOCUMENT # N35426

1. Entity Name

TOWERWOOD HOMEOWNERS ASSN., INC.

Principal Place of Business	Mailing Address
565 MARTINIQUE DRIVE LAKE WALES FL 33859 US	565 MARTINIQUE DRIVE LAKE WALES FL 33859 US

1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2982615 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

WESTON, ALAN R
565 MARTINIQUE DRIVE
LAKE WALES FL 33859

7. Name and Address of New Registered Agent

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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when changing)

FILE NOW: FEE IS $61.25
Due By May 1, 2008

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HOTT, MARY 403 MONTEGO BAY LAKE WALES FL 33859	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD FRANK L. NOBLE 3174 ANTIQUA Rd LAKE WALES, FL 33859	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WESTON, ALAN 565 MARTINIQUE DR LAKE WALES FL 33859	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Janet Chadwick 475 Towerwood Blvd Lake Wales, FL 33859	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ATKINS, ROBERT 408 TAHITI DR LAKE WALES FL 33859	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD EDWARD D. COX 533 BERMUDA DR LAKE WALES, FL 33859	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WILLIAMS, BILL 504 MARTINIQUE DR. LAKE WALES FL 33859	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD OLSEN, CAROL 443 TAHITI LAKE WALES FL 33859	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Alan R Weston 863-678-0103