4-18-95-B-3815-C

FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N44473 (9)

1. Corporation Name

THE TOWERS AT PONCE INLET, TOWER I, CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4545 S ATLANTIC AVE BOX 3000 PONCE INLET FL 32127 US	4545 S ATLANTIC AVE BOX 3000 PONCE INLET FL 32127 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/25/1991
3a. Date of Last Report: 04/21/1994
4. FEI Number: 59-3080352 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / County 25	Zip 29 / County 30

9. Name and Address of Current Registered Agent

PARK, KENNETH P.
4545 S. ATLANTIC AVE.
UNIT 3504
PONCE INLET FL 32127

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City FL 35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition P
NAME	PARK, KENNETH P.	12 NAME	PARK, KENNETH P.
STREET ADDRESS	4545 S. ATLANTIC AVE UNIT 3504	13 STREET ADDRESS	4545 S. ATLANTIC AVE UNIT 3504
CITY ST ZIP	PONCE INLET FL	14 CITY ST ZIP	PONCE INLET FL
TITLE	VP	21 TITLE	☑ Change ☐ Addition D
NAME	KERN, ANTHONY	22 NAME	JOHN IDDINGS
STREET ADDRESS	4545 S. ATLANTIC AVE UNIT 3503	23 STREET ADDRESS	4545 S. ATLANTIC AVE UNIT 3303
CITY ST ZIP	PONCE INLET FL	24 CITY ST ZIP	PONCE INLET FL
TITLE	T	31 TITLE	☑ Change ☐ Addition D
NAME	FALCO, PETER	32 NAME	LARRY HINDERS
STREET ADDRESS	4545 S. ATLANTIC AVE UNIT 3304	33 STREET ADDRESS	4545 S. ATLANTIC AVE UNIT 3401
CITY ST ZIP	PONCE INLET FL	34 CITY ST ZIP	PONCE INLET FL
TITLE	S	41 TITLE	☑ Change ☐ Addition D
NAME	MCCANN, JOHN	42 NAME	ANTHONY BLAGS
STREET ADDRESS	4545 S. ATLANTIC AVE UNIT 3202	43 STREET ADDRESS	4545 S. ATLANTIC AVE UNIT 3605
CITY ST ZIP	PONCE INLET FL	44 CITY ST ZIP	PONCE INLET FL
TITLE	D	51 TITLE	☑ Change ☐ Addition D
NAME	PERRO, JOHN	52 NAME	TIM REISINGER
STREET ADDRESS	4545 S. ATLANTIC AVE. UNIT 3302	53 STREET ADDRESS	4545 S. ATLANTIC AVE UNIT 3103
CITY ST ZIP	PONCE INLET FL	54 CITY ST ZIP	PONCE INLET FL
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	UNDOCUMENTED BY BANK
CITY ST ZIP		64 CITY ST ZIP	

5/1/95 MB

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or added in attachment with an address.

SIGNATURE: Kenneth P Park KENNETH P. PARK 4/12/95 904-760-3059
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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