2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State
03-07-2002 90026 031 ****61.25

22127

DO NOT WRITE IN THIS SPACE

DOCUMENT # N44473

1. Entity 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

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-3080352 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PARK, KENNETH P. 4545 S. ATLANTIC AVE. UNIT 3504 PONCE INLET FL 32127	Name: JAMES-JOHNSTON Street Address (P.O. Box Number is Not Acceptable): 4545 S. ATLANTIC AVE UNIT 3603 City: PONCE INLET, FL Zip Code: 32127

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.

SIGNATURE _____ 2/21/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PARK, KENNETH P. 4545 S. ATLANTIC AVE UNIT 3504 PONCE INLET FL	☒ Delete	VP MARGARET PARK 4545 S. ATLANTIC UNIT 3504 PONCE INLET, FL 32127	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T (T) PHELAN, JIM 4545 S ATLANTIC AV 3801 PONCE INLET FL 32127	☐ Delete		☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP (P) JOHNSTON, JAMES P 4545 S. ATLANTIC AVE #3603 PONCE INLET FL 32127	☐ Delete	PRESIDENT (P) JAMES-JOHNSTON 4545 S. ATLANTIC UNIT 3603 PONCE INLET, FL 32127	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KERN, TONY 4545 S ATLANTIC AV 3304 PONCE INLET FL 32127	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FALCO, DOROTHY 4545 ATLANTIC AV 3304 PONCE INLET FL 32127	☐ Delete	SEC. (S,D) DOROTHY FALCO 4545 S. ATLANTIC AVE UNIT 3304 PONCE INLET, FL 32127	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____ 2/21/02 762-4521
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #