

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002469

FILED  
Apr 29, 2007  
Secretary of State

**Entity Name:** THE TOWERS AT PONCE INLET, TOWER IV, CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4555 S ATLANTIC AVE  
SUITE 4000  
PONCE INLET, FL 32127

**New Principal Place of Business:**

4555 S. ATLANTIC AVE  
SUITE 4000  
PONCE INLET, FL 32127

**Current Mailing Address:**

4555 S ATLANTIC AVE  
SUITE 4000  
PONCE INLET, FL 32127

**New Mailing Address:**

4555 S. ATLANTIC AVE  
SUITE 4000  
PONCE INLET, FL 32127

**FEI Number:** 59-3238925

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MACKENZIE, DON  
4555 S ATLANTIC AVE, # 4301  
PONCE INLET, FL 32127 US

**Name and Address of New Registered Agent:**

MACKENZIE, DON  
4555 S ATLANTIC AVE, # 4301  
PONCE INLET, FL 32127 US

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:

04/29/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: MAAS, DONNA  
Address: 4555 S. ATLANTIC AVE #4309  
City-St-Zip: PONCE INLET, FL 32127

Title: P ( ) Delete  
Name: MACKENZIE, DON  
Address: 4555 S ATLANTIC #4301  
City-St-Zip: PONCE INLET, FL 32127

Title: D ( ) Delete  
Name: INGALLS, AL  
Address: 4555 S ATLANTIC AVE UNIT 4310  
City-St-Zip: PONCE INLET, FL 32127

Title: TRES ( ) Delete  
Name: JANKE, GAIL  
Address: 4555 S ATLANTIC AVE UNIT 4311  
City-St-Zip: PONCE INLET, FL 32127

Title: V ( ) Delete  
Name: CORBE, TOM  
Address: 4555 S ATLANTIC AVE UNIT 4406  
City-St-Zip: PORT INLET, FL 32127

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: S (X) Change ( ) Addition  
Name: MAAS, DONNA  
Address: 4555 S. ATLANTIC AVE, #4309  
City-St-Zip: PONCE INLET, FL 32127

Title: P (X) Change ( ) Addition  
Name: MACKENZIE, DON  
Address: 4555 S. ATLANTIC AVE, #4301  
City-St-Zip: PONCE INLET, FL 32127

Title: D (X) Change ( ) Addition  
Name: INGALLS, AL  
Address: 4555 S ATLANTIC AVE, #4310  
City-St-Zip: PONCE INLET, FL 32127

Title: TRES (X) Change ( ) Addition  
Name: JANKE, ED  
Address: 4555 S. ATLANTIC AVE, #4311  
City-St-Zip: PONCE INLET, FL 32127

Title: V (X) Change ( ) Addition  
Name: SHEEHAN, TIM  
Address: 4555 S. ATLANTIC AVE, #4609  
City-St-Zip: PONCE INLET, FL 32127

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DON MACKENZIE

P

04/29/2007

Electronic Signature of Signing Officer or Director

Date