

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001936

FILED
Mar 05, 2009
Secretary of State

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

Current Principal Place of Business:

4545 S ATLANTIC AVE UNIT 3000
PONCE INLET, FL 32127 US

New Principal Place of Business:

Current Mailing Address:

4565 S ATLANTIC AVE BOX 5000
PONCE INLET, FL 32127 US

New Mailing Address:

FEI Number: 59-3316672 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAQUETTE, RENE
4565 S ATLANTIC AVE UNIT 5103
PONCE INLET, FL 32127 US

Name and Address of New Registered Agent:

PAQUETTE, RENE P
4565 S ATLANTIC AVE UNIT 5103
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: RENE PAQUETTE 03/05/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: FEZZA, PAT
Address: 4565 S ATLANTIC AVE UNIT 5611
City-St-Zip: PONCE INLET, FL 32127 US

Title: P () Delete
Name: PAQUETTE, RENE
Address: 4565 S ATLANTIC AVE UNIT 5103
City-St-Zip: PONCE INLET, FL 32127 US

Title: VP () Delete
Name: NASH, KEVIN
Address: 4565 S ATLANTIC AVE UNIT 5510
City-St-Zip: PONCE INLET, FL 32127 US

Title: S () Delete
Name: KONCZAL, JOHN
Address: 4565 S ATLANTIC AVE UNIT 5505
City-St-Zip: PONCE INLET, FL 32127 US

Title: D () Delete
Name: BIRD, CLAUDE
Address: 4565 S ATLANTIC AVE UNIT 5710
City-St-Zip: PONCE INLET, FL 32127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RENE PAQUETTE P 03/05/2009

Electronic Signature of Signing Officer or Director Date