

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 04, 2005 8:00 am**  
**Secretary of State**

08-04-2005 90002 044 \*\*\*150.00

**DOCUMENT # P95000002240**

1. Entity Name  
**HIGHTOWER ASSOCIATES, INC.**



Principal Place of Business

**7698 LAS CRUCES CT  
BOYNTON BCH, FL 33437 US**

Mailing Address

**PO BOX 740146  
BOYNTON BCH, FL 33474 US**

**50059807**



07132005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0542074**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**CAPELLER, JOHN  
350 CAMINO GARDENS  
#303  
BOCA RATON, FL 33432**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 7, 2005**

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	EPSTEIN, RICHARD
STREET ADDRESS	7698 LAS CRUCES CT
CITY-ST-ZIP	BOYNTON BCH, FL 33437
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 607, 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: Richard J. Epstein **RICHARD J EPSTEIN** 7/27/05 576-740-3323  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

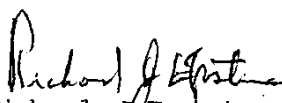
50059807  
# p95 000002240

**Hightower Assoc. Inc.**  
**P.O. Box 740146**  
**Boynton Beach, FL 33474**

I do not recall receiving this form this year. Hightower Associates  
has always been prompt in paying their taxes.

Enclosed is a check for \$150.00. If you have further questions, please  
contact me at 561-740-3323 .

Thank you,

  
Richard J. Epstein

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