

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 730810

**FILED**  
**Mar 15, 2018**  
**Secretary of State**  
**CC9283390469**

**Entity Name:** 2100 TOWERS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2100 NORTH ATLANTIC AVENUE  
COCOA BEACH, FL 32931

**Current Mailing Address:**

2100 NORTH ATLANTIC AVENUE  
COCOA BEACH, FL 32931

**FEI Number:** 59-1583525

**Certificate of Status Desired:** No

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

BOSCO, JOSEPH J  
2100 N. ATLANTIC AVE.  
PH-4  
COCOA BEACH, FL 32931 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HARAWAY, ALVA E  
Address        2100 N. ATLANTIC AVE  
                  UNIT # 301  
City-State-Zip: COCOA BEACH FL 32931

Title            DIRECTOR  
Name            LOY, ERNIE  
Address        2100 N ATLANTIC AVE  
                  UNIT # 704  
City-State-Zip: COCOA BEACH FL 32931

Title            VP  
Name            LARAMIE, DAVID  
Address        2100 N ATLANTIC AVENUE  
                  UNIT # 907  
City-State-Zip: COCOA BEACH FL 32931

Title            TREASURER  
Name            MALLORY, KAREN  
Address        2100 N. ATLANTIC AVE  
                  UNIT # 203  
City-State-Zip: COCOA BEACH FL 32931

Title            S  
Name            MACHOCK, SUZANNE  
Address        2100 N. ATLANTIC AVE  
                  UNIT # 609  
City-State-Zip: COCOA BEACH FL 32931

Title            DIRECTOR  
Name            KAZMERSKI, KENNETH  
Address        2100 N. ATLANTIC AVE  
                  UNTI # 205  
City-State-Zip: COCOA BEACH FL 32931

Title            DIRECTOR  
Name            CUNNINGHAM, SCOTT  
Address        2100 N. ATLANTIC AVE.  
                  806  
City-State-Zip: COCOA BEACH FL 32931

*I hereby 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 all other like empowered.*

**SIGNATURE:** ALVA E. HARAWAY

**PRESIDENT**

**03/15/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date