

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000004883

**FILED**  
**Mar 26, 2013**  
**Secretary of State**  
**CC5571699911**

**Entity Name:** TOWER VIEW ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

135 N 6TH STREET  
SECOND FLOOR  
HAINES CITY, FL 33844

**Current Mailing Address:**

P.O. BOX 444  
WEBSTER, FL 33597

**FEI Number:** 20-5377323

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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 D  
Name MOORE, TERRY  
Address P.O. BOX 444  
City-State-Zip: WEBSTER FL 33597

Title D  
Name ANDERSON, RYAN  
Address P.O. BOX 444  
City-State-Zip: WEBSTER FL 33597

Title D  
Name WALKER, COREY  
Address P.O. BOX 444  
City-State-Zip: WEBSTER FL 33597

*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:** TERRY MOORE

**DIRECTOR**

**03/26/2013**

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

\_\_\_\_\_  
Date