

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44473

Entity Name: THE TOWERS AT PONCE INLET, TOWER I, CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**4545 S ATLANTIC AVE UNIT 3001
PONCE INLET, FL 32127**Current Mailing Address:**4545 S ATLANTIC AVE UNIT 3001
PONCE INLET, FL 32127 US**FEI Number: 59-3080352****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**TOMOKA PROPERTY MANAGEMENT
TOMOKA PROPERTY MANAGEMENT
4639 S. CLYDE MORRIS BLVD SUITE 106
PORT ORANGE, FL 32129 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: NATHAN WADE****03/18/2021**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	TYLER, CAROL
Address	4545 S ATLANTIC AVE UNIT 3305
City-State-Zip:	PONCE INLET FL 32127

Title	VP
Name	FALCON, PETER
Address	4545 S ATLANTIC AVE UNIT 3202
City-State-Zip:	PONCE INLET FL 32127

Title	PRESIDENT
Name	SNYDER, JEFF
Address	4545 S ATLANTIC AVE UNIT 3106
City-State-Zip:	PONCE INLET FL 32127

Title	DIRECTOR
Name	BLALOCK, ROBERT
Address	4545 S ATLANTIC AVE UNIT 3201
City-State-Zip:	PONCE INLET FL 32127

Title	S
Name	DAVIS, ANGELA
Address	4545 S ATLANTIC AVE UNIT 3605
City-State-Zip:	PORT INLET FL 32127

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: JEFF SNYDER**PRESIDENT****03/18/2021**

Electronic Signature of Signing Officer/Director Detail

Date