2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004825

FILED Mar 23, 2005 Secretary of State

Entity Name: THE TOWER RESIDENCES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 35 WATERGATE DRIVE SARASOTA, FL 34236 **Current Mailing Address: New Mailing Address:** 35 WATERGATE DRIVE SARASOTA, FL 34236 FEI Number: 01-0607322 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DRAMIS, GEORGE JESQ 601 S OSPREY AVE SARASOTA, FL 34236 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SHAPIRO, HARRY J Name: Name: 35 WATERGATE DRIVE, #1204 Address: Address: City-St-Zip: SARASOTA FL 34236 City-St-Zip: Title: () Delete Title: () Change () Addition CARTER, DONALD J Name: Name: Address: 35 WATERGATE DRIVE, #1802 Address: City-St-Zip: SARASOTA, FL 34236 City-St-Zip: Title: () Delete Title: (X) Change () Addition FINE, MARIN L FINE, MARTIN L Name: Name: 35 WATERGATE DRIVE, #1401 35 WATERGATE DRIVE, #1005 Address: Address: City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34236 Title: () Delete Title: D (X) Change () Addition Name: FARESE, THERESA Name: FARESE, THERESA Address: 35 WATERGATE DRIVE, #402 Address: 35 WATERGATE DRIVE, #402 City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34236 Title: () Delete Title: DS () Change (X) Addition THOMSON, CHARLES W Name: Name: 35 WATERGATE DRIVE #1401 Address: Address: City-St-Zip: City-St-Zip: SARASOTA, FL 34236

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHARLES W THOMSON DS 03/23/2005