

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000007048

**Entity Name:** THE TOWER AND EXECUTIVE RESIDENCES MASTER ASSOCIATION, INC.

**FILED**  
**Apr 21, 2014**  
**Secretary of State**  
**CC4478423406**

**Current Principal Place of Business:**

3300 SW 27 AVENUE  
COCONUT GROVE, FL 33133

**Current Mailing Address:**

420 S. DIXIE HIGHWAY  
SUITE 4B  
CORAL GABLES, FL 33146 US

**FEI Number: 51-0419107**

**Certificate of Status Desired: No**

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

UNITED STATES REGISTERED AGENTS, INC  
420 S. DIXIE HIGHWAY  
SUITE 4B  
CORAL GABLES, FL 33146 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 DRAWBRIDGE, ROBERT E  
Address 3400 SW 27TH AVE  
City-State-Zip: COCONUT GROVE FL 33133

Title D  
Name GRUSSMARK, STEPHEN DR  
Address 3400 SW 27TH AVE #1601  
City-State-Zip: COCONUT GROVE FL 33133

Title D  
Name TYMINS, DOUGLAS  
Address 3400 SW 27 AVENUE  
City-State-Zip: COCONUT GROVE FL 33133

Title D  
Name STEWART, REX  
Address 3400 SW 27 AVENUE  
City-State-Zip: COCONUT GROVE FL 33133

*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: ROBERT E DRAWBRIDGE**

**DIRECTOR**

**04/21/2014**

Electronic Signature of Signing Officer/Director Detail

Date