

THE TOWERS CONDOMINIUM ASSOCIATION, INC.  
C/o Alliant Property Management, LLC  
6719 Winkler Road, Suite 200  
Fort Myers, Florida 33919  
Tel. (239)454-1101 \* Fax (239)454-1147

**NOTICE OF INTENT**

I, (please print) \_\_\_\_\_, unit  
address \_\_\_\_\_, hereby place my name in nomination as a  
candidate for the , **TOWERS CONDOMINIUM ASSOCIATION, INC,**  
Board of Directors. I understand that I am responsible for the accuracy of the  
information on the enclosed information sheet.

\_\_\_\_\_  
(Signature)

\_\_\_\_/\_\_\_\_/\_\_\_\_  
(Date)

**CONDOMINIUM ASSOCIATION CANDIDATE CERTIFICATION FORM\***

I, \_\_\_\_\_, certify that I have read and  
(Print name of candidate)  
understand to the best of my ability, the governing documents of:

THE TOWERS CONDOMINIUM ASSOCIATION, INC.

and the provisions of Chapter 718, The Florida Condominium Act, and any applicable rules. This is  
available on-line at [www.leg.state.fl.us/Statutes](http://www.leg.state.fl.us/Statutes) or by contacting the State of Florida at  
800-226-9101.

Signed: \_\_\_\_\_  
(Signature of candidate)

Date: \_\_\_\_\_

\*required by section 718.112(2) (d) three. Florida Statutes