

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2003 8:00 am
Secretary of State

02-07-2003 90093 044 ****61.25

DOCUMENT # 714261

1. Entity Name
THE ATLANTIS REGENCY CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**169 ATLANTIS BLVD
ATLANTIS FL 33462**

Mailing Address

**169 ATLANTIS BLVD
ATLANTIS FL 33462**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1315394**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**PHILLIPS, R L
169 ATLANTIS BLVD 105
ATLANTIS FL 33462**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SULLIVAN, WILLIAM H 169 ATLANTIS BLVD 108 ATLANTIS FL 33462-1169	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T PHILLIPS, R L 169 ATLANTIS BLVD 105 ATLANTIS FL 33462-1169	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MARASIULO, EDWARD 169 ATLANTIS BLVD 203 ATLANTIS FL 33462-1169	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BOGGS, RALPH 169 ATLANTIS BLVD 106 ATLANTIS FL	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DOLORES, ALBERT 169 ATLANTIS BLVD 308 ATLANTIS FL 33462-1169	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Robert L. Phillips* **RECEIVED** *2/6/03* *561-644 0372*

CR2E037 (10/02)