

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716399

FILED
Apr 08, 2009
Secretary of State

Entity Name: ATLANTIC OCEAN CLUB CONDOMINIUM APARTMENTS, INC.

Current Principal Place of Business:

4020 GALT OCEAN DR
FT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

4020 GALT OCEAN DR
FT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 59-1316714 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOZZOLILLO, GIUSEPPEE D
4020 GALT OCEAN DRIVE
FT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: SALCE, ANTHONY
Address: 4020 GALT OCEAN DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: VP () Delete
Name: CAPALDI, ANTHONY
Address: 4020 GALT OCEAN DR
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: S () Delete
Name: LYONS, WILLIAM
Address: 4020 GALT OCEAN DR.
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: COCKMAN, MADISON H
Address: 4020 GALT OCEAN DR.
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: T () Delete
Name: MALEBRANCHE, YOLANDE
Address: 4020 GALT OCEAN DR
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: P () Delete
Name: ZENNI, TRUDY P
Address: 4020 GALT OCEAN DR
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: CAPALDI, ANTHONY
Address: 4020 GALT OCEAN DR
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: COCKMAN, MADISON H
Address: 4020 GALT OCEAN DR.
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D (X) Change () Addition
Name: MALEBRANCHE, YOLANDE
Address: 4020 GALT OCEAN DR
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: P (X) Change () Addition
Name: JENNINGS, EDWARD J
Address: 4020 GALT OCEAN DR
City-St-Zip: FORT LAUDERDALE, FL 33308

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ANTHONY CAPALDI

T

04/08/2009

Electronic Signature of Signing Officer or Director

_____ Date