

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750991

FILED  
Jan 06, 2011  
Secretary of State

**Entity Name:** ATLANTIC GARDENS OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

8401 N ATLANTIC AVENUE  
CAPE CANAVERAL, FL 32920

**New Principal Place of Business:**

**Current Mailing Address:**

8401 N ATLANTIC AVENUE  
CAPE CANAVERAL, FL 32920

**New Mailing Address:**

FEI Number: 59-2059113

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PERNA, ERIK  
8401 N. ATLANTIC AVE. #J-6  
CAPE CANAVERAL, FL 32920 US

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

BARNES, ROBERT K  
8401 N. ATLANTIC AVE. #I-12  
CAPE CANAVERAL, FL 32920 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: ROBERT K. BARNES

01/06/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: PERNA, ERIK  
Address: 8401 N. ATLANTIC AVE. #J-6  
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: S/TR  
Name: DULA, JULIE  
Address: 8401 N. ATLANTIC AVE. # G-8  
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: PD  
Name: BARNES, ROBERT K  
Address: 8401 N. ATLANTIC AVE. #I-12  
City-St-Zip: CAPE CANAVERAL, FL 32920

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 K. BARNES

PD

01/06/2011

Electronic Signature of Signing Officer or Director

Date