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**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

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**DO NOT WRITE IN THIS SPACE**

**CORPORATION  
ANNUAL REPORT  
1995**



**FLORIDA DEPARTMENT OF STATE**  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # 751573 (7)**  
1. Corporation Name  
**ATLANTIS CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business <b>ATLANTIS ON AMEILA CONDOMINIUM ASSO. INC. 3420 S. FLETCHER AVENUE FERNANDINA BCH. FL 32034</b>	Mailing Address <b>ATLANTIS ON AMEILA CONDOMINIUM ASSO. INC. 3420 S. FLETCHER AVENUE FERNANDINA BCH. FL 32034</b>
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent  
**LATIMER, KENNETH P  
3420 S. FLETCHER AVE., UNIT #303  
FERNANDINA BCH. FL 32034**

3. Date Incorporated or Qualified <b>03/17/1980</b>	3a. Date of Last Report <b>05/13/1994</b>
4. FEI Number <b>59-2052700</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fees Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	<b>\$68.75</b> Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

10. Name and Address of New Registered Agent

81 Name <b>LATIMER, KENNETH P.</b>	82 Street Address (P.O. Box Number is Not Acceptable) <b>3420 S FLETCHER AVENUE UNIT #303</b>
83	84 City <b>FERNANDINA BEACH</b>
85 Zip Code <b>FL 32034</b>	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE: *[Signature]* DATE: **4/28/95**

12. OFFICERS AND DIRECTORS

TITLE <b>PD</b>	NAME <b>MOORE, CLEON E</b>	STREET ADDRESS <b>602 HARDEMAN AVE. FT. VALLEY GA 31030</b>
TITLE <b>V</b>	NAME <b>LATIMER, KENNETH P</b>	STREET ADDRESS <b>3420 S. FLETCHER AVE. #303 FERNANDINA BCH. FL 32034</b>
TITLE <b>ST</b>	NAME <b>HOOPER, JOHN F</b>	STREET ADDRESS <b>3420 S. FLETCHER AVE. #301 FERNANDINA BCH. FL 32034</b>
TITLE <b>D</b>	NAME <b>LANGDALE, WILLIAM P</b>	STREET ADDRESS <b>3420 S. FLETCHER AVE. #206 FERNANDINA BCH. FL 32034</b>
TITLE <b>D</b>	NAME <b>RENFROE, O LANE</b>	STREET ADDRESS <b>609 PINEPOINT CIRCLE VALDOSTA GA 31601</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE <b>PD</b>	1.2 NAME <b>LATIMER, KENNETH R</b>	1.3 STREET ADDRESS <b>3420 S FLETCHER AVENUE UNIT # 303</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE <b>V</b>	2.2 NAME <b>UNDERWOOD HERBERT</b>	2.3 STREET ADDRESS <b>3420 S FLETCHER AVENUE</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE <b>ST</b>	3.2 NAME <b>HOOPER, JOHN F</b>	3.3 STREET ADDRESS <b>3420 S FLETCHER AVENUE # 301</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE <b>D</b>	4.2 NAME <b>LANGDALE, WILLIAM P</b>	4.3 STREET ADDRESS <b>3420 S FLETCHER AVENUE #206</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE <b>D</b>	5.2 NAME <b>MOORE, CLEON E</b>	5.3 STREET ADDRESS <b>602 HARDEMAN AVENUE</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.4 CITY - ST - ZIP	<b>FT VALLEY GA #1-#)</b>		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: **4/28/95** DAYTIME PHONE # **904/261-4400**