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FILED  
May 14 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # 756250 (7)  
1. Corporation Name  
ATLANTIS PINES CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address  
4978 FREEDOM CIRCLE 958 S. DIXIE HWY  
LAKE WORTH FL 33461 LANTANA FL 33462

3. Date Incorporated or Qualified

02/09/1981

4. FEI Number

59-2421640

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 No Accounting For The Difference  
Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~BLAKE, GARY S ESQ.~~  
521 LAKE AVENUE, STE. 3  
LAKE WORTH FL 33460

DAWN SCRANTON  
5121 PALO VERDE PL  
West Palm Beach, FL  
33415

81 Name

DAWN SCRANTON

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

5121 PALO VERDE PL

83

WEST PALM BCH.

84 City

FL

85 Zip Code

33415

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Dawn Scranton

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME INNIS, BILL  
STREET ADDRESS FREEDOM CIRCLE  
CITY-ST-ZIP LAKE WORTH FL

1.1 TITLE PD  
1.2 NAME BILL INNIS  
1.3 STREET ADDRESS 4913 FREEDOM CIRCLE  
1.4 CITY-ST-ZIP LAKE WORTH, FL 33461

TITLE VD  
NAME YLPELKONEN, MARJA-LEENA  
STREET ADDRESS 4978 FREEDOM CIR  
CITY-ST-ZIP LAKE WORTH FL

2.1 TITLE VD  
2.2 NAME CHRISTINE OPDYKE  
2.3 STREET ADDRESS 4913 FREEDOM CIRCLE  
2.4 CITY-ST-ZIP LAKE WORTH, FL 33461

TITLE SD  
NAME LVANAINEN, SEIJA  
STREET ADDRESS PALOMINO DR  
CITY-ST-ZIP LANTANA FL

3.1 TITLE SD  
3.2 NAME MARJA-LEENA YLPELKONEN  
3.3 STREET ADDRESS 4978 FREEDOM CIRCLE  
3.4 CITY-ST-ZIP LAKE WORTH, FL 33461

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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

Dawn Scranton

4/24/98

955-7141

CR2E037 (10/97)