2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K27150

Entity Name: ATLANTIC BEACH CLUBS-TWO, INC.

FILED Jan 20, 2009 Secretary of State

ipal Place of Business:
ci

4060 GALT OCEAN DRIVE FORT LAUDERDALE, FL 33308

Current Mailing Address: New Mailing Address:

4060 GALT OCEAN DRIVE FORT LAUDERDALE, FL 33308 US

FEI Number: 65-0062407 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NICE, DAVID NICE, DAVID

101 S FT LAUDERDALE BEACH BLVD
1501
101 S FT LAUDERDALE BEACH BLVD
1506

FT LAUDERDALE, FL 33308 US FT LAUDERDALE, FL 33316 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: 01/20/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: NICE, DAVID J Name: NICE, DAVID J

Address: 101 S FT LAUDERDALE BEACH BLVD # 1501 Address: 101 S FT LAUDERDALE BEACH BLVD # 1506

City-St-Zip: FT LAUDERDALE, FL 33308 US City-St-Zip: FT LAUDERDALE, FL 33316 US

Title: V () Delete Title: V (X) Change () Addition

 Name:
 NICE, YARUSETT
 Name:
 NICE, YARUSETT

 Address:
 4060 GALT OCEAN DRIVE
 4060 GALT OCEAN DRIVE

 City-St-Zip:
 FT LAUDERDALE, FL 33308
 City-St-Zip:
 FT LAUDERDALE, FL 33308 US

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 GIANNICO, OMAR A

 Address:
 Address:
 4060 GALT OCEAN DRIVE

 City-St-Zip:
 City-St-Zip:
 FT LAUDERDALE, FL 33308 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID NICE P 01/20/2009