

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23909

FILED  
Feb 01, 2011  
Secretary of State

**Entity Name:** ATLANTIC EAST CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

ATLANTIC EAST CONDOMINIUM  
6170 A1A SOUTH  
ST. AUGUSTINE, FL 320807537 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3544  
SAINT AUGUSTINE, FL 32085

**New Mailing Address:**

FEI Number: 59-2858726

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PALAZZO, PETER J  
6170 A1A SOUTH  
SAINT AUGUSTINE, FL 32080 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: DT  
Name: MCELROY, ROSS  
Address: 2211 NW 27TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: DS  
Name: KISH, JR., JOHN  
Address: 4421 NW 65TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32606

Title: DVP  
Name: BOSTWICK, ANN  
Address: 6170 A1A SOUTH #209  
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: DP  
Name: RYALS, MICHAEL  
Address: 5601 NW 88TH STREET  
City-St-Zip: GAINESVILLE, FL 32653

Title: D  
Name: SCRIMAGER, RALPH  
Address: P. O. BOX 369  
City-St-Zip: MATTOON, IL 61938

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: JOHN KISH, JR.

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02/01/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date