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Apr 17 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **741222** (4)

1. Corporation Name

THE ATLANTIS BUILDING A CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**10102 SO. OCEAN DR.
ATLANTIS OFFICE BOX
JENSEN BEACH FL 34957**

**10102 SO. OCEAN DR.
ATLANTIS OFFICE BOX
JENSEN BEACH FL 34957**

3. Date Incorporated or Qualified

12/27/1977

4. FEI Number

59-1986936

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip 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

**DALY JR., T. E.
10102 SOUTH OCEAN DRIVE
APARTMENT 509
JENSEN BEACH FL 34957**

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

**PD
LIEBING, HOWARD
10102 S A1A #710
JENSEN BCH, FL 00000**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☒ DELETE

**TD
LOPES, OSCAR
10102 S OCEAN DR #705
JENSEN BCH. FL**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

**D
BEIT, PETER
10102 SOUTH OCEAN DRIVE, #310
JENSEN BEACH FL**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☒ DELETE

**D
JAMES RINGO
10102 S. OCEAN DR., #305
JENSEN BEACH FL**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

**SD
DALY, TOM
10102 S OCEAN DR #509
JENSEN BCH FL**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP ☒ Change ☐ Addition

D

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP ☐ Change ☒ Addition

**T/S
SHIRLEY ROSS
10102 S OCEAN DR #413
JENSEN BEACH, FL 34957**

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP ☒ Change ☐ Addition

P/D

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP ☐ Change ☒ Addition

**NEW V.P.
ALAN MAR M100
10102 S. OCEAN DR #702
JENSEN BEACH, FL 34957**

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP ☒ Change ☐ Addition

D

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

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:

[Signature]

A.J. 4-7-98

22-9-1733

CR2E037 (10/97)