

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2001 8:00 am
Secretary of State

01-30-2001 90132 037 ****61.25

DOCUMENT # 743513

1. Entity Name

THE ATLANTIS BUILDING B CONDOMINIUM ASSOCIATION,

Principal Place of Business

Mailing Address

10152 SOUTH OCEAN DR.
 JENSEN BEACH FL 34957

10152 SOUTH OCEAN DR.
 JENSEN BEACH FL 34957

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1997824**

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RUDD, ENID
10152 SOUTH OCEAN DRIVE
JENSEN BEACH FL 34957

Name

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

City

FL

Zip Code

8. 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

Enid Rudd **ENID RUDD**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** Delete
 NAME **NAVARRE, JOHN L**
 STREET ADDRESS **10152 S. OCEAN DR.**
 CITY-ST-ZIP **JENSEN BEACH FL 34957**

TITLE **P** Change Addition
 NAME **DOROTHY WHEELER**
 STREET ADDRESS **10152 S. OCEAN DR**
 CITY-ST-ZIP **JENSEN BEACH FL 34957**

TITLE **VP** Delete
 NAME **REUSS, KENNETH J**
 STREET ADDRESS **10152 S. OCEAN DR.**
 CITY-ST-ZIP **JENSEN BEACH FL 34957**

TITLE **VP** Change Addition
 NAME **STEVEN SHENBERGER**
 STREET ADDRESS **10152 S. OCEAN DR**
 CITY-ST-ZIP **JENSEN BEACH FL 34957**

TITLE **SD** Delete
 NAME **RUDD, ENID**
 STREET ADDRESS **10152 S. OCEAN DR.**
 CITY-ST-ZIP **JENSEN BEACH FL 34957**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **TD** Delete
 NAME **THOMSON, ROBERT**
 STREET ADDRESS **10152 S. OCEAN DR.**
 CITY-ST-ZIP **JENSEN BEACH FL 34957**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **BANFIELD, FRANK**
 STREET ADDRESS **10152 S OCEAN DR**
 CITY-ST-ZIP **JENSEN BEACH FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Enid Rudd **ENID RUDD**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/2001 ~~913-4~~ 229-0321

Date

Daytime Phone #

01-30-2001 11:00 AM