

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762100

FILED
Feb 27, 2009
Secretary of State

Entity Name: ATRIUM CIVIC IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

C/O PRESIDENTIAL GROUP SOUTH, INC.
135 W PINEVIEW ST
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

C/O PRESIDENTIAL GROUP SOUTH, INC.
135 W PINEVIEW ST
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 59-2315297

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRESIDENTIAL GROUP SOUTH, INC.
135 W PINEVIEW ST
ALTAMONTE SPRINGS, FL 32714 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: P () Delete
Name: CAMPAYNE, ALMA
Address: 2331 ATRIUM CIRCLE
City-St-Zip: ORLANDO, FL 32808

Title: T () Delete
Name: THOMPSON, CYNTHIA
Address: 2491 ATRIUM CIRCLE
City-St-Zip: ORLANDO, FL 32808

Title: S () Delete
Name: ALLEN, RACHEL
Address: 2224 OAKBRIDGE WAY
City-St-Zip: ORLANDO, FL 32808

Title: D (X) Delete
Name: BEASLEY, MARILYN
Address: 2431 ATRIUM CIRCLE
City-St-Zip: ORLANDO, FL 32808

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T,D (X) Change () Addition
Name: BEASLEY, MARILYN
Address: 2431 ATRIUM CIRCLE
City-St-Zip: ORLANDO, FL 32808

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: ALMA CAMPAYNE

P

02/27/2009

Electronic Signature of Signing Officer or Director

Date