2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2009
Secretary of State

DOCUMENT# N95000004883

Entity Name: ATLANTIC PLAZA CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

425 S ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

Current Mailing Address:

425 S ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169

New Mailing Address:

FEI Number: 59-3350782 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUBY, DONNA F
425 S ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169 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: S/D ( ) Delete
Name: MANSUY, PAUL
Address: 1871 LAKE WATERFORD DR.
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VPD ( ) Delete
Name: FRY, TOM
Address: 1245 OAKDALE ST.
City-St-Zip: WINDERMERE, FL 34786

Title: D ( ) Delete
Name: GREEN, GLENN L
Address: 2500 TEAL RD.
City-St-Zip: LINDENHURST, IL 60046

Title: PD ( ) Delete
Name: BRUCE, GREG
Address: 4288 KENDRICK RD.
City-St-Zip: ORLANDO, FL 32804

Title: TD ( ) Delete
Name: WALDECK, JOHN
Address: 2258 CANDLEWOOD LANE, EAST
City-St-Zip: NEW SMYRNA BEACH, FL 32168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JOHN WALDECK T 04/10/2009
Electronic Signature of Signing Officer or Director — Date