

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 762100

**Entity Name:** ATRIUM CIVIC IMPROVEMENT ASSOCIATION, INC.

**Current Principal Place of Business:**

498 PALM SPRINGS DR STE 210  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

498 PALM SPRINGS DR STE 210  
ALTAMONTE SPRINGS, FL 32701 US

**FEI Number:** 59-2315297

**Certificate of Status Desired:** No

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

SIGNATURE MANAGEMENT SOLUTIONS, LLC  
498 PALM SPRINGS DR STE 210  
ALTAMONTE SPRINGS, FL 32701 US

*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:** INGRID BARIA

03/16/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name CAMPAYNE, ALMA  
Address 498 PALM SPRINGS DR STE 210  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title SD  
Name ALLEN, RACHEL  
Address 498 PALM SPRINGS DR STE 210  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title D  
Name OGDEN, BETTY  
Address 498 PALM SPRINGS DR STE 210  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title D  
Name WILLIAMS, KATINA  
Address 498 PALM SPRINGS DR STE 210  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

*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:** ALMA CAMPAYNE

PD

03/16/2017

Electronic Signature of Signing Officer/Director Detail

Date