

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02676

**Entity Name:** LE ATLANTICO CONDOMINIUM ASSOC., INC.**Current Principal Place of Business:**1404 N. ATLANTIC AVENUE  
DAYTONA BEACH, FL 32118**Current Mailing Address:**18 BOVARD AVE, SUITE A  
ORMOND BEACH, FL 32176 US**FEI Number:** 59-2495464**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HART PRO REALTY  
18 BOVARD AVE, SUITE A  
ORMOND BEACH, FL 32176 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:** PAUL HART

04/30/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name           MELAHN, SCOTT  
Address        9N 903 KOSHARE CIR  
City-State-Zip: ELGIN IL 60124

Title            DIRECTOR  
Name           LANKFORD, PAMELA L  
Address        39 ROSEVEAR ST.  
City-State-Zip: ORLANDO FL 32804

Title            D  
Name           CROSS, WALTER  
Address        PO BOX 568  
City-State-Zip: NEW LEBANON NY 12125

Title            SECRETARY, TREASURER  
Name           RENFRO, RICHARD  
Address        1404 N ATLANTIC AVE #6  
City-State-Zip: DAYTONA BEACH FL 32118

Title            VP  
Name           RILEY, GARY  
Address        108 CHERRY RD  
City-State-Zip: SYRACUSE NY 13219

*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:** SCOTT MELAHN

PRESIDENT

04/30/2014

Electronic Signature of Signing Officer/Director Detail

Date