2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23909

Entity Name: ATLANTIC EAST CONDOMINIUM ASSOCIATION, INC.

FILED Feb 06, 2015 **Secretary of State** CC8130222774

Current Principal Place of Business:

C/O SOVEREIGN & JACOBS 461 A1A BEACH BLVD. ST. AUGUSTINE, FL 32080

Current Mailing Address:

461 A1A BEACH BLVD.

SAINT AUGUSTINE, FL 32080 US

FEI Number: 59-2858726 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOVEREIGN-JACOBS PROPERTY MANAGEMENT COMPANIES, LLC 461 A1A BEACH BLVD. SAINT AUGUSTINE, FL 32080 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: ELLEN G. LUMPKIN 02/06/2015

> Date Electronic Signature of Registered Agent

> > 108

Officer/Director Detail:

Title DIRECTOR, SECRETARY Title DIRECTOR, PRESIDENT FOUTS, DOUGLAS MURPHY, RICHARD Name Name Address 6170 A1A SOUTH Address 6170 A1A SOUTH

#204

ST. AUGUSTINE FL 32080 City-State-Zip: ST. AUGUSTINE FL 32080 City-State-Zip:

DIRECTOR, VICE PRESIDENT DIRECTOR, TREASURER Title Title

Name BUTTERFIELD, FRANK Name LOHREY, ILONA

Address 6170 A1A SOUTH Address 6170 A1A SOUTH, #321

ST. AUGUSTINE FL 32080 City-State-Zip: ST. AUGUSTINE FL 32080 City-State-Zip:

Title **DIRECTOR**

FLETCHALL, KELLY Name

Address 6170 A1A SOUTH

204

ST. AUGUSTINE FL 32080 City-State-Zip:

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: RICHARD MURPHY **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

02/06/2015 Date