

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N23909

**Entity Name:** ATLANTIC EAST CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**5455 A1A SOUTH  
SUITE 3  
ST. AUGUSTINE, FL 32080**Current Mailing Address:**5455 A1A SOUTH  
SUITE 3  
ST. AUGUSTINE, FL 32080 US**FEI Number:** 59-2858726**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MAY MANAGEMENT SERVICES, INC  
5455 A1A SOUTH  
SUITE 3  
ST. 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:** ANNA MARKS

03/14/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P
Name	GORELL, TOM
Address	5455 A1A SOUTH
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	SECRETARY
Name	KITCHIN, TOM
Address	5455 A1A SOUTH SUITE 3
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	DIRECTOR
Name	CONABLE, RICK
Address	5455 A1A SOUTH SUITE 3
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	VP
Name	FLETCHALL, KELLY
Address	5455 A1A SOUTH SUITE 3
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	TREASURER
Name	BLANKENBURG, JEFF
Address	5455 A1A SOUTH SUITE 3
City-State-Zip:	ST. AUGUSTINE FL 32080

*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:** TOM GORELL

PRESIDENT

03/14/2023

Electronic Signature of Signing Officer/Director Detail

Date