

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N33658

**Entity Name:** ATLANTICA CONDOMINIUM MANAGEMENT ASSOCIATION, INC.**Current Principal Place of Business:**4601 SO ATLANTIC AVE  
PONCE INLET, FL 32127**Current Mailing Address:**4601 SO ATLANTIC AVE  
PONCE INLET, FL 32127 US**FEI Number:** 59-2968389**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MANN, PAMELA S  
4601 SO ATLANTIC AVE  
PONCE INLET, FL 32127 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:** PAMELA S. MANN, PROPERTY MGR.

05/15/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DP
Name	HILBRICH, JERRY
Address	1353 FERN AVE
City-State-Zip:	ORLANDO FL 32814

Title	DV
Name	JOHNSON, FAYE
Address	4531 SE 47TH PLACE
City-State-Zip:	OCALA FL 34480

Title	D
Name	MAHLER, MIKE
Address	5004 JENNIFER PLACE
City-State-Zip:	ORLANDO FL 32807

Title	D
Name	MERRELL, JOE
Address	109 ASHFORD DRIVE
City-State-Zip:	WINTER SPRINGS FL 32708

Title	DIRECTOR
Name	JOHNS, JAMES MURRAY
Address	1227 EAST LAKE COLONY DRIVE
City-State-Zip:	MAITLAND FL 32751

*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:** JERRY HILBRICH**DIRECTOR**

05/15/2015

Electronic Signature of Signing Officer/Director Detail

Date