

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 345681

Entity Name: ATLANTIC APARTMENTS, INC.**Current Principal Place of Business:**ATLANTIC APARTMENTS, INC.
90 NE 19TH AVENUE
DEERFIELD BEACH, FL 33441**Current Mailing Address:**C/O VESTA PROPERTY SERVICES
751 PARK OF COMMERCE DRIVE 118
BOCA RATON, FL 33487 US**FEI Number:** 59-1385628**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ASSOCIATED CORPORATE SERVICES
6111 BROKEN SOUND PARKWAY NW
SUITE 200
BOCA RATON, FL 33487 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:** EDWARD S. HAMMEL, ESQ.

07/20/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PUCCI, LAUREN
Address C/O VESTA PROPERTY SERVICES
 751 PARK OF COMMERCE DRIVE 118
City-State-Zip: BOCA RATON FL 33487

Title DIRECTOR
Name REIDY, DANIELLE
Address C/O VESTA PROPERTY SERVICES
 751 PARK OF COMMERCE DRIVE 118
City-State-Zip: BOCA RATON FL 33487

Title SECRETARY
Name PATRICIA, ANA
Address C/O VESTA PROPERTY SERVICES
 751 PARK OF COMMERCE DRIVE 118
City-State-Zip: BOCA RATON FL 33487

Title TREASURER
Name LEVY, EMANUEL
Address 751 PARK OF COMMERCE DR.
 SUITE 118
City-State-Zip: BOCA RATON FL 33487

Title DIRECTOR
Name CONLON, GARY
Address C/O VESTA PROPERTY SERVICES
 751 PARK OF COMMERCE DRIVE 118
City-State-Zip: BOCA RATON FL 33487

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANA PATRICIA**SECRETARY**

07/20/2020

Electronic Signature of Signing Officer/Director Detail

Date