

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V44833

**Entity Name:** ATLANTIC COAST MANAGEMENT, INC.

**Current Principal Place of Business:**

4301 MEETING PLACE  
SANFORD, FL 32773

**Current Mailing Address:**

P O BOX 947568  
MAITLAND, FL 32794 US

**FEI Number:** 59-3263388

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GARCIA, MANUEL III  
4301 MEETING PLACE  
SANFORD, FL 32773 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            COMPROLLER  
Name            CASTELOW, SHARON K  
Address        P O BOX 947568  
City-State-Zip: MAITLAND FL 32794

*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:** SHARON CASTELOW

MGR

01/31/2023

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date