# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 19, 2010**
**Secretary of State**

DOCUMENT# 723098

**Entity Name:** ATLANTIQUE CONDOMINIUM COMPLEX, INC

**Current Principal Place of Business:**

4800 OCEAN BEACH BLVD.
COCOA BEACH, FL 32931

**New Principal Place of Business:**

**Current Mailing Address:**

4800 OCEAN BEACH BLVD.
COCOA BEACH, FL 32931

**New Mailing Address:**

**FEI Number: 59-1412010** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

DOTEN, ROSI
4800 OCEAN BEACH BLVD.
#122
COCOA BEACH, FL 32931 US

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

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

**OFFICERS AND DIRECTORS:**

Title: TD
Name: ALLEN, JOANN
Address: 4800 OCEAN BEACH BLVD #127
City-St-Zip: COCOA BEACH, FL 32931

Title: VPD
Name: WELLS, MICHAEL
Address: 4800 OCEAN BEACH BLVD, SUITE #323
City-St-Zip: COCOA BEACH, FL 32931

Title: PD
Name: DOTEN, ROSI
Address: 4800 OCEAN BEACH BLVD., #122
City-St-Zip: COCOA BEACH, FL 32931

Title: SD
Name: MASKIELL, FRANK
Address: 4800 OCEAN BEACH BLVD SUITE #130
City-St-Zip: COCOA BEACH, FL 32931

Title: VP
Name: PERRY, TOM
Address: 4800 OCEAN BCH BLVD #315
City-St-Zip: COCOA BEACH, FL 32931

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: JOANN ALLEN TD 01/19/2010

Electronic Signature of Signing Officer or Director — Date