2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738688

FILED Feb 21, 2009 Secretary of State

Entity Name: SILVER THATCH ATLANTIC PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

531 NORTH OCEAN BLVD. POMPANO BEACH, FL 330624616

Current Mailing Address: New Mailing Address:

531 NORTH OCEAN BLVD. C/O CASTLE MANAGEMENT POMPANO BEACH, FL 330624616 US PO BOX 559009

FORT LAUDERDALE, FL 33355 US

FEI Number: 59-1744998 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SIEGFRIED, RIVERA, LERNER, DE LA TOREE 201 ALHAMBRA CIRCLE SUITE 603 CORAL GABLES., FL 33134 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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition CHUCKAS, SEAN WIESEL, SCOTT Name: Name: 531 N. OCEAN BLVD., 1402 Address: 525 N. OCEAN BLVD., 1225 Address: City-St-Zip: POMPANO BEACH, FL 33062 City-St-Zip: POMPANO BEACH, FL 33062 Title: Title: () Delete () Change () Addition WESTMORELAND, ROBERT Name: Name: Address: 525 N OCEAN DRIVE Address: City-St-Zip: POMPANO BEACH, FL 33062 City-St-Zip: Title: 1VP () Delete Title: 1VP (X) Change () Addition WIESEL, SCOTT MORGAN, THOMAS Name: Name: 525 N. OCEAN BLVD., 1225 Address: Address: 525 N. OCEAN BLVD., 522 City-St-Zip: POMPANO BEACH, FL 33062 City-St-Zip: POMPANO BEACH, FL 33062 Title: () Delete Title: VD () Change (X) Addition Name: Name: KINNIER, BOB Address: Address: 525 N OCEAN BLVD, #1816 City-St-Zip: City-St-Zip: POMPANO BCH, FL 33062 Title: () Delete Title: () Change (X) Addition SHERIDAN, DAVID Name: Name: 531 N OCEAN BLVD #1712 Address: Address: City-St-Zip: City-St-Zip: POMPANO BCH, FL 33062 Title: () Delete Title: () Change (X) Addition CANELLIS, GEORGE Name: Name: Address: Address: 531 N OCEAN BLVD #1910 POMPANO BCH, FL 33062 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT A DONNELLY MGR 02/21/2009