

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750116

FILED  
Jan 15, 2009  
Secretary of State

**Entity Name:** THE ATRIUM GARDENS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

18001 NORTH BAY RD  
SUNNY ISLES, FL 33160 US

**New Principal Place of Business:**

**Current Mailing Address:**

18001 NORTH BAY RD  
SUNNY ISLES, FL 33160 US

**New Mailing Address:**

**FEI Number:** 59-2270630

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MEDEROS, RALPH  
4114 NW 4TH AVE  
MIAMI, FL 33126 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: PD ( ) Delete  
Name: ETCHEVERRY, ALFREDO L  
Address: 18001 NORTH BAY RD #303  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: SD ( ) Delete  
Name: BARRUECO, ENCARNACION  
Address: 18001 NORTH BAY RD  
City-St-Zip: SUNNY ISLES, FL 33160 US

Title: VD ( ) Delete  
Name: SANTANDER, ARTMAO  
Address: 18001 N BAY RD  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SANTANDER, ARTURO M  
Address: 18001 NORTH BAY RD #209  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: SD (X) Change ( ) Addition  
Name: ESTRADA, JOSE  
Address: 18001 NORTH BAY RD#208  
City-St-Zip: SUNNY ISLES, FL 33160 US

Title: VD (X) Change ( ) Addition  
Name: ETCHEVERRY, ALFREDO L  
Address: 18001 N BAY RD#303  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

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: ARTURO M. SANTANDER

PD

01/15/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date