

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 751573

1. Entity Name

ATLANTIS CONDOMINIUM ASSOCIATION, INC.

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90357 038 ****61.25

Principal Place of Business

ATLANTIS ON AMEILA CONDOMINIUM ASSO. INC.
3420 S. FLETCHER AVENUE
FERNANDINA BCH. FL 32034

Mailing Address

ATLANTIS ON AMEILA CONDOMINIUM ASSO. INC.
3420 S. FLETCHER AVENUE
FERNANDINA BCH. FL 32034-4383

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2052700**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

UNDERWOOD, ADDIE G
3420 S FLETCHER AVE UNIT #204
FERNANDINA BCH. FL 32034

Name

Adamson, Weldon T.

Street Address (P.O. Box Number is Not Acceptable)

3420 S Fletcher Avenue

City

Fernandina Beach

FL

Zip Code
32034

8. 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: *Weldon T. Adamson, Manager*
Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required upon reinstating)

DATE

4/29/00

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	D UNDERWOOD, ADDIE	☒ Delete
STREET ADDRESS	3420 S FLETCHER AVE UNIT #204	
CITY-ST-ZIP	FERNANDINA BCH. FL	
TITLE NAME	ST ROBERTS, J. W.	☐ Delete
STREET ADDRESS	3420 S FLETCHER AVE UNIT #404	
CITY-ST-ZIP	FERNANDINA BCH. FL	
TITLE NAME	VP WILLIAMS, MARGARET E.	☐ Delete
STREET ADDRESS	3420 S. FLETCHER AVE, SUITE 406	
CITY-ST-ZIP	FERNANDINA BCH. FL 32034	
TITLE NAME	PD DONOVAN, DANIEL J	☒ Delete
STREET ADDRESS	3420 S FLETCHER AVE #104	
CITY-ST-ZIP	FERNANDINA BCH. FL	
TITLE NAME	D LOUDERMILK, LARRY R	☒ Delete
STREET ADDRESS	3739 CREEK HOLLOW LAND	
CITY-ST-ZIP	MIDDLEBURG FL	
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		

TITLE NAME	P LANGDALE, W. P.	☒ Change ☐ Addition
STREET ADDRESS	3420 S FLETCHER AVENUE UNIT #206	
CITY-ST-ZIP	FERNANDINA BEACH, FL 32034	
TITLE NAME	VP ROBERTS, J. W.	☒ Change ☐ Addition
STREET ADDRESS	3420 S FLETCHER AVE UNIT #404	
CITY-ST-ZIP	FERNANDINA BEACH, FL 30234	
TITLE NAME	ST WILLIAMS, MARGARET E	☒ Change ☐ Addition
STREET ADDRESS	3420 S FLETCHER AVE, UNIT #406	
CITY-ST-ZIP		
TITLE NAME	D JAY, CHARLES	☒ Change ☐ Addition
STREET ADDRESS	3420 S FLETCHER AVENUE UNIT #103	
CITY-ST-ZIP	FERNANDINA BEACH, FL 32034	
TITLE NAME	D RICHARD AKIN	☒ Change ☐ Addition
STREET ADDRESS	129 Hamilton Road	
CITY-ST-ZIP	Chappaqua, NY 10504	
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *SIGNATURE REQUIRED*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/00

Date

904261-4400

Daytime Phone #

CR2E037 (9/99)