

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753805

FILED
Jan 10, 2011
Secretary of State

Entity Name: 1800 ATLANTIC CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1800 ATLANTIC BLVD
MANAGER'S OFFICE
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

1800 ATLANTIC BLVD
MANAGER'S OFFICE
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 59-2355530

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROGEL, DAVID H ESQ
C/O BECKER & POLIAKOFF, P.A.
121 ALHAMBRA PLAZA, 10TH FLOOR
CORAL GABLES, FL 33040 US

Name and Address of New Registered Agent:

ROGEL, DAVID H ESQ
C/O BECKER & POLIAKOFF, P.A.
121 ALHAMBRA PLAZA, 10TH FLOOR
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:

01/10/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PT
Name: BRASUELL, WILLIAM
Address: 1800 ATLANTIC BLVD. - UNIT NO. A-402
City-St-Zip: KEY WEST, FL 33040

Title: VP
Name: MCDONNELL, PETER
Address: 1800 ATLANTIC BLVD. UNIT NO. B-118
City-St-Zip: KEY WEST, FL 33040

Title: TR
Name: BRADFORD, CHARLES
Address: 1800 ATLANTIC BLVD. - UNIT NO. C-137
City-St-Zip: KEY WEST, FL 33040

Title: SEC
Name: STRAVINSKY, RONALD
Address: 1800 ATLANTIC BLVD. - UNIT NO. A-314
City-St-Zip: KEY WEST, FL 33040

Title: DIR
Name: PEKAREK, ROBERT
Address: 1800 ATLANTIC BLVD. - UNIT NO. C-334
City-St-Zip: KEY WEST, FL 33040

Title: DIR
Name: MORECRAFT, RICHARD
Address: 1800 ATLANTIC BLVD. - UNIT NO. C-225
City-St-Zip: KEY WEST, FL 33040

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: WILLIAM BRASUELL

PT

01/10/2011

Electronic Signature of Signing Officer or Director

Date