

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756465

FILED
Aug 04, 2009
Secretary of State

Entity Name: ATLANTIS ID, A CONDOMINIUM, INC.

Current Principal Place of Business:

2901-A PAR LANE
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

2901- C PAR LANE
TALLAHASSEE, FL 32301 US

Current Mailing Address:

2901-A PAR LANE
TALLAHASSEE, FL 32301 US

New Mailing Address:

2901- C PAR LANE
TALLAHASSEE, FL 32301 US

FEI Number: 59-2251116 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ANNIE, THOMAS L
2901-A PAR LANE
TALLAHASSEE, FL 32301 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: D () Delete
Name: THOMAS, ANNIE
Address: 2901-A PAR LN
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: DON, BAILEY
Address: 2901-B PAR LANE
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: TAYLOR, ANN
Address: 2901-C PAR LN
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: RYAN, RICHARD
Address: 2901-D PAR LN
City-St-Zip: TALLAHASSEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: TAYLOR, ANN E
Address: 2901-C PAR LN
City-St-Zip: TALLAHASSEE, FL 32301

Title: ST (X) Change () Addition
Name: DON, BAILEY
Address: 2901-B PAR LANE
City-St-Zip: TALLAHASSEE, FL 32301

Title: D (X) Change () Addition
Name: THOMAS, ANNIE
Address: 2901-A PAR LN
City-St-Zip: TALLAHASSEE, FL 32301

Title: D (X) Change () Addition
Name: RYAN, RICHARD
Address: 2901-D PAR LN
City-St-Zip: TALLAHASSEE, FL 32301

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: ANN E. TAYLOR

PT

08/04/2009

Electronic Signature of Signing Officer or Director

Date