2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007655

FILED Mar 02, 2009 Secretary of State

Entity Name: THE ATRIUM ON THE OCEAN II CONDOMINIUM ASSOCIATION, INC.

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

3000 NORTH A1A

NORTH HUTCHINSON ISLAND, FL 34949

Current Mailing Address: New Mailing Address:

1111 SE FEDERAL HWY **STE 100** STUART, FL 34994

FEI Number: 81-0549414 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:

ROSS, DEBORAH 759 S. FEDERAL HWY. STE 212 STUART, FL 34994

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:

Date

Name:

Electronic Signature of Registered Agent

HARTLINE, ALAN

OFFICERS AND DIRECTORS:

(X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete HARTLINE, ALAN Name: 3000 N A1A #3-B Address:

Address: 3000 N A1A #3-B City-St-Zip: N. HUTCHINSON ISLAND, FL 34949 City-St-Zip: FT. PIERCE, FL 34949

Title: PD () Delete Title: (X) Change () Addition OESTEREICH, GENE Name: OESTEREICH, GENE Name: Address: 3000 NORTH A1A #10-D Address: 3000 NORTH A1A #10-D

City-St-Zip: NORTH HUTCHINSON, FL 34949 City-St-Zip: FT. PIERCE, FL 34949 Title: VPTD () Delete Title: TD (X) Change () Addition

HAGER, LEE HAGER, LEE Name: Name:

Address: 3000 NORTH A1A 8A Address: 3000 NORTH A1A #8A City-St-Zip: NORTH HUTCHINSON ISLAND, FL 34949 City-St-Zip: FT. PIERCE, FL 34949

Title: SD () Delete Title: SD (X) Change () Addition

Name: MCKEEMAN, ROBERT Name: MCKEEMAN, ROBERT Address: 3000 NORTH A1A 2A Address: 3000 NORTH A1A 2A City-St-Zip: NORTH HUTCHINSON, FL 34949 City-St-Zip: FT. PIERCE, FL 34949

Title: () Delete Title: (X) Change () Addition

GIGANTE, JOHN GIGANTE, JOHN Name: Name: 3000 N A1A 3-D 3000 N A1A #3-D Address: Address: FORT PIERCE, FL 34949 City-St-Zip: City-St-Zip: FORT PIERCE, FL 34949

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: GENE OESTEREICH **PRES** 03/02/2009