

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 24, 2010
Secretary of State

DOCUMENT# N05000001687

Entity Name: ATLANTIS CONDOMINIUM ASSOCIATION OF MIAMI BEACH, INC.**Current Principal Place of Business:**1751 JAMES AVENUE
MIAMI BEACH, FL 33139**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 402507
MIAMI BEACH, FL 33140**New Mailing Address:**C/O AMERICAN PROPERTY MANAGEMENT SPC.
PO BOX 191042
MIAMI BEACH, FL 33119**FEI Number:** 20-2436803**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BAKALAR & ASSOCIATES, P.A.
150 SOUTH PINE ISLAND ROAD
SUITE 540
PLANTATION, FL 33324 US**Name and Address of New Registered Agent:**AMERICAN PROPERTY MANAGEMENT SPC.
1370 WASHINGTON AVENUE
SUITE 203
MIAMI BEACH, FL 33119 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: KRISTINA MANGOLD

08/24/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: LUBEN, STEVE
Address: P.O. BOX 402507
City-St-Zip: MIAMI BEACH, FL 33140

Title: VP
Name: HESKETT, NICOLA
Address: P.O. BOX 402507
City-St-Zip: MIAMI BEACH, FL 33140

Title: T
Name: CASTRO, JOSE
Address: P.O. BOX 402507
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGR
Name: MANGOLD, KRISTINA
Address: PO BOX 191042
City-St-Zip: MIAMI BEACH, FL 33119

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: STEVE LUBEN

P

08/24/2010

Electronic Signature of Signing Officer or Director

Date