

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2001 8:00 am
Secretary of State

03-29-2001 90356 008 *****61.25

DOCUMENT # N12877

1. Entity Name

OCEANS ATRIUM ONE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

**3013 SOUTH ATLANTIC AVENUE
 DAYTONA BEACH SHORES FL 32118**

Mailing Address

**3013 SOUTH ATLANTIC AVENUE
 DAYTONA BEACH SHORES FL 32118**

937893



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2807078

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

**SPATOLA, ANTONINO
 3013 S ATLANTIC AVENUE
 SUITE #506
 DAYTONA BEACH SHORES FL 32118**

Name **Joanne L. Hunt**
 Street Address (P.O. Box Number is Not Acceptable)

3013 S. Atlantic Ave. #906

City **Daytona Beach Shores FL** Zip Code **32118**

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 **Joanne L. Hunt**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**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 **PD** ☒ Delete
 NAME **FLINN, ANNE L**
 STREET ADDRESS **3013 S ATLANTIC AVE #1006**
 CITY-ST-ZIP **DAYTONA BEACH SHORES FL 32118**

TITLE **PD** ☒ Change ☒ Addition
 NAME **Fenton, Bill**
 STREET ADDRESS **3013 S. Atlantic Ave. #1105**
 CITY-ST-ZIP **Daytona Beach Shores, FL 32118**

TITLE **SD** ☐ Delete
 NAME **HUNT, JOANNE L**
 STREET ADDRESS **3013 S ATLANTIC AVE #906**
 CITY-ST-ZIP **DAYTONA BEACH SHORES FL 32118**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☒ Delete
 NAME **WORKMAN, EARL**
 STREET ADDRESS **3013 S. ATLANTIC AVE., #1203**
 CITY-ST-ZIP **DAYTONA BEACH SHORES FL 32118**

TITLE **D** ☐ Change ☒ Addition
 NAME **Ferguson, Bill**
 STREET ADDRESS **3013 S. Atlantic Ave. #1203**
 CITY-ST-ZIP **Daytona Beach Shores, FL 32118**

TITLE **V** ☒ Delete
 NAME **SPATOLA, ANTHONY**
 STREET ADDRESS **3013 S. ATLANTIC SHORES AVENUE #506**
 CITY-ST-ZIP **DAYTONA BEACH SHORES FL 32118**

TITLE **V** ☒ Change ☐ Addition
 NAME **Flinn, Anne L.**
 STREET ADDRESS **3013 S. Atlantic Ave. #1006**
 CITY-ST-ZIP **Daytona Beach Shores, FL 32118**

TITLE **TD** ☒ Delete
 NAME **GRANEY, DAN**
 STREET ADDRESS **3013 A. ATLANTIC AVE #201**
 CITY-ST-ZIP **DAYTONA BEACH FL 32118**

TITLE **TD** ☐ Change ☒ Addition
 NAME **Teater, Robert B.**
 STREET ADDRESS **3013 S. Atlantic Ave. #903**
 CITY-ST-ZIP **Daytona Beach Shores, FL 32118**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 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:

Joanne L. Hunt
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)