

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15293

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: ATLANTIC TERRACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3629 S ATLANTIC AVE  
DAYTONA BCH SHORE, FL 321274601

**New Principal Place of Business:**

**Current Mailing Address:**

3629 S ATLANTIC AVE  
DAYTONA BCH SHORE, FL 321274601

**New Mailing Address:**

FEI Number: 59-2772488

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SOLOMON, KAREN  
3511 S PENINSULA DR  
DAYTONA BEACH, FL 32127 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: P ( ) Delete  
Name: LEVEE, GUY  
Address: 6516 RIDENOUR WAY EAST  
City-St-Zip: ELDERSBURG, MD 21784

Title: T ( ) Delete  
Name: PATTERSON, LOWELLT  
Address: 1408 HIGHLAND AVE  
City-St-Zip: CINNAMINSON, NJ 08007

Title: VP ( ) Delete  
Name: SABA, GEORGE  
Address: 431 SPRING ST.  
City-St-Zip: HOWELL, MI 48843

Title: D ( ) Delete  
Name: GAUDETTE, EDWARD  
Address: 24 EAST EARLE STREET  
City-St-Zip: CUMBERLAND, RI 02864

Title: D ( ) Delete  
Name: CHAMPION, HOWARD  
Address: 2406 SCOTT DR. NW  
City-St-Zip: HARTSELLE, AL 40422

Title: DS ( ) Delete  
Name: GRIFFEN, BEN  
Address: 2021 LOCH BERRY RD  
City-St-Zip: WINTER PRK, FL 32792

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: O'KEEFE, FRANK  
Address: 812 MEADOW PARK DR  
City-St-Zip: MINNEOLA, FL 34715

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: GUY LEVEE

P

04/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date