2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# N25932

Entity Name: ATLANTIC TOWERS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2900 HARTLEY RD
ATLANTIC BEACH, FL 32233 US

New Principal Place of Business:

2900 HARTLEY RD
JACKSONVILLE, FL 32257 US

Current Mailing Address:

2900 HARTLEY ROAD
JACKSONVILLE, FL 32257 US

New Mailing Address:

2900 HARTLEY RD
JACKSONVILLE, FL 32257 US

FEI Number: 59-2951411 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STELLAR, PROPERTIES
2900 HARTLEY RD
JACKSONVILLE, FL 32257 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: DPT ( ) Delete
Name: HOZA, CHRIS
Address: 23695 SEMINOLE RD.
City-St-Zip: ATLANTIC BEACH, FL 32253

Title: DV ( ) Delete
Name: ADOMEC, MARK
Address: 236 SEMINOLE RD
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: DS ( ) Delete
Name: BEARD, LARRY
Address: 2361 SEMINOLE RD.
City-St-Zip: ATLANTIC BEACH, FL 32233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition
Name: HOZA, CHRIS
Address: 2365 SEMINOLE RD.
City-St-Zip: ATLANTIC BEACH, FL 32253

Title: DV (X) Change ( ) Addition
Name: ADAMEC, MARK
Address: 236 SEMINOLE RD
City-St-Zip: ATLANTIC BEACH, FL 32233

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: CHRIS HOZA DPT 03/25/2009

Electronic Signature of Signing Officer or Director — Date