2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2009
Secretary of State

DOCUMENT# N33658

Entity Name: ATLANTICA CONDOMINIUM MANAGEMENT ASSOCIATION, INC.

Current Principal Place of Business:

4601 SO ATLANTIC AVE
PONCE INLET, FL 32127 US

New Principal Place of Business:

Current Mailing Address:

4601 SO ATLANTIC AVE
PONCE INLET, FL 32127 US

New Mailing Address:

FEI Number: 59-2968389 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HILBRICH, PEGGY
1353 FERN AVE
ORLANDO, FL 32814 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:	DP	( ) Delete
Name:	HILBRICH, PEGGY	
Address:	1353 FERN AVE	
City-St-Zip:	ORLANDO, FL 32814 US	
Title:	DV	( ) Delete
Name:	MILLER, MARTIN	
Address:	4601 S ATLANTIC AVE	
City-St-Zip:	PONCE INLET, FL 32127	
Title:	D	( ) Delete
Name:	MARITN, DON	
Address:	14104 BRAMBLE BUSH COURT	
City-St-Zip:	ORLANDO, FL 32832	
Title:	D	( ) Delete
Name:	KELLY, MARIAN	
Address:	4601 S ATLANTIC AVE	
City-St-Zip:	PONCE INLET, FL 32127	
Title:	D	( ) Delete
Name:	KNOX, KATHY	
Address:	4601 S ATLANTIC AVE	
City-St-Zip:	PONCE INLET, FL 32127	

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:	( ) 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: PEGGY HILBRICH DP 01/05/2009

Electronic Signature of Signing Officer or Director — Date