2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Secretary of State DOCUMENT # N39871 1. Entity Name 03-24-2006 90029 050 ****61.25 ATLANTIC 22 CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address quuso-2390 N. OCEAN SHORE BLVD. 2390 N. OCEAN SHORE BLVD. ORMOND BEACH FL 32176-2423 ORMOND BEACH FL 32176-2423 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 59-3037535 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent STEWART (LAKENCE STEWART, CLARENCE Street Address (P.O. Box Number is Not Acceptable) 2390 OCEAN SHORE BLVD \$104 UNIT 104 ORMOND BEACH FL 32176~ Zip Code 32/76 DRINOND BONEN 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. I am familiar with, and accept DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE:IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10 OFFICERS AND DIRECTORS ☐ Delete Change TITLE TITLE DE LISLE JOE 2390 OVEAN SHONE BLVO. DE LISLE, JOE NAME NAME 8520E STREAMVIEW DRIVE STREET ADDRESS STREET ADDRESS **HUNTERSVILLE NC 28078** CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition STEWART, CLARENCE NAME NAME No CHANGE 2390 OCEAN SHORE BLVD #104 STREET ADDRESS STREET ADDRESS ORMOND BEACH FL 32176 CITY-ST-ZIP C!TY-S1-ZIP Delete Change Addition TITLE VΡ TITLE BRYANT, GLENDA NAME NAME 1375 BYWOOD CT. STREET ADDRESS STREET ADDRESS SUWANEE GA 30024 CITY-ST-ZIP City-St-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NO CHANGE NAME DIGIACOMO, SANDY NAME 38 HARVEY ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLIFTON NJ 07102 CITY-ST-ZIP Delete Addition TITLE TITLE BORGES, MICHEAL NAME NAME 3167 HANGING MASS CIRCLE STREET ADDRESS STREET ADDRESS KISSIMMEE FL 34741 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: Clique & Standard

STREET ADDRESS

CITY-ST-ZIP

MAKEH 14, 2006 386-441-2891

FILED

Mar 24, 2006 8:00 am