

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41603

FILED
Mar 26, 2010
Secretary of State

Entity Name: ATLANTIC VIEW BEACH CLUB CONDOMINIUM NO. ONE ASSOCIATION, INC.

Current Principal Place of Business:

5047 N. A1A
FORT PIERCE, FL 34949 US

New Principal Place of Business:

Current Mailing Address:

VISTA PROPERTIES MGMT
100 VISTA ROALE BLVD
VERO BEACH, FL 32962

New Mailing Address:

VISTA PROPERTIES MGMT
2043 14TH AVENUE
VERO BEACH, FL 32960

FEI Number: 65-0166816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLOCK, SAMUEL
21 ROYAL PALM POINTE
SUITE 100
VERO BEACH, FL 32960 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
Name: LEPINE, MAURICE
Address: 5047 N A1A 906
City-St-Zip: FORT PIERCE, FL 34949

Title: T
Name: DAVIS, KEN
Address: 5047 N. A1A # 202
City-St-Zip: FORT PIERCE, FL 34949

Title: VP
Name: PEZELJ, JACK
Address: 5047 N. A1A # 1501
City-St-Zip: FORT PIERCE, FL 34949

Title: DIR
Name: BENARDO, STEVEN M
Address: 5047 N A1A #PH-1
City-St-Zip: FORT PIERCE, FL 34949

Title: SEC
Name: CECCONI, LOUANNE
Address: 5047 N A1A 701
City-St-Zip: FORT PIERCE, FL 34949

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA A. MILLER

LCAM

03/26/2010

Electronic Signature of Signing Officer or Director

Date