# 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED**
**Jun 01, 2009**
**Secretary of State**

DOCUMENT# N94000003134

**Entity Name:** ATLANTIC I AT THE POINT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

21200 POINT PLACE
AVENTURA, FL 33180 US

**New Principal Place of Business:**

**Current Mailing Address:**

21200 POINT PLACE
AVENTURA, FL 33180 US

**New Mailing Address:**

**FEI Number: 65-0579499** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

HYMAN, SPENCER & MARS, L.L.P.
C/O HYMAN & KAPLAN
150 W. FLAGLER ST., 27TH FLOOR
MIAMI, FL 33130 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: BLACHMAN, GUSTAVO
Address: 21200 POINT PLACE # 2401
City-St-Zip: AVENTURA, FL 33180

Title: VP ( ) Delete
Name: LUSTIG, ROY ESQ
Address: 1210 SCHTRUSTIATZ CENTER
City-St-Zip: MIAMI, FL 33130

Title: T ( ) Delete
Name: LEW, OLIVERIO ESQ
Address: 21200 POINT PLACE # 1604
City-St-Zip: AVENTURA, FL 33180

Title: S ( ) Delete
Name: FALCO GREENBERG, LORI
Address: 21200 POINT PLACE # 2001
City-St-Zip: AVENTURA, FL 33180

Title: D ( ) Delete
Name: FIRTH, DON
Address: 21200 PT PL # 1705
City-St-Zip: MIAMI, FL 33180

**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: FERTIG, MICHAEL
Address: 21200 PT PL # 2603
City-St-Zip: MIAMI, FL 33180

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: GUSTAVO BLACHMAN PRES 06/01/2009

Electronic Signature of Signing Officer or Director — Date