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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90178 032 \*\*\*158.75

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P93000080063**

CITY-ST-ZIP

ATRIUM AT CLEARWATER, INCORPORATED

Principal Place	e of Business	Mailing Address						•	
1601 FORUM PL	L	1601 FORUM PL				·			
SUITE 805		SUITE 805			•				
WEST PALM BEACH FL 33401		WEST PALM BEACH FL 33401			DO NOT WRITE IN THIS SPACE				
US		US				3. Date Incorporated or Qualifed			
						11/19/1993			\ \
O Principal D	lace of Business	2a. Mailing Address				4. FEI Number		ΙT	Applied For
·	lace of Business	— ·				59-3209701		} <del>-</del> -	Not Applicable
21	·	26				39 3209101		60.7	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	□ <b>}</b>	7	5 Additional
22		27							Required
. City & State	e	City & State				6. Election Campaign Financing		\$5.0	00 May Be
23		28				Trust Fund Contribution		Add	ed to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes the cui	rent year Int	angible	
<del></del>	25	<del></del>	30			Personal Property Tax.	•	Ŭ Yes	□No
24	9. Name and Address of Currer		<del>50</del> 1			10. Name and Address of New	Registered	Agent	
-	9. Name and Address of Curren	nt Registered Agent		81 1	Name	10, Name and Address of Name	,		
MAC	VEV WALTED LID		1	۱  ۱۳	Name				İ
MACKEY, WALTER J JR			f	82 Street Add		ess (P.O. Box Number is Not Accept	table)		
772 LAGOON DRIVE									·
NOR	TH PALM BEACH FL 33408		Ì	83		-			
	•								
	•		Ī	84 (	City		FI	85   Z	ip Code
				_				•	
11. Pursuant	to the provisions of Sections 607.050 egistered agent, or both, in the State	02 and 607.1508, Florida Statute	s, the at	ove-n	named corpo	oration submits this statement for the	purpose of	changing	its registered
office or re	egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida, Such change was au	monzea	рγин	e corporatio	on's poard of directors, i flereby acce	pt the appoi	municine as	, registored
			เสล ราลเม	ites.					
ago,a	an landing was, and decept the conge	ations of, Section Cor. 0303, Flori	ida Statu	ités.		•			ļ
SIGNATURE			da Siatu	iles.			DATE		
SIGNATURE	Signature, typed or printed name of registered age	ont and title if applicable. (NOTE:	Registered	iles.		d when reinstating)	DATE EICERS AN	ID DIREC	
SIGNATURE	Signature, typed or printed name of registered age OFFICERS AN	ont and title if applicable. (NOTE:	Registered	Agent siç					TORS IN 12
SIGNATURE	Signature, typed or printed name of registered age OFFICERS AN	ont and title if applicable. (NOTE:	Registered	Agent sk LE		d when reinstating)		ID DIREC	TORS IN 12
SIGNATURE	Signature, typed or printed name of registered age OFFICERS AN PD MACKEY, WALTER J JR	ont and title if applicable. (NOTE:	Registered	Agent sk LE		d when reinstating)			TORS IN 12
SIGNATURE  12.  TITLE	Signature, typed or printed name of registered age OFFICERS AN	ont and title if applicable. (NOTE:	13. 1.1 TIT	Agent sk LE	gnature required	d when reinstating)			TORS IN 12
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN PD MACKEY, WALTER J JR 772 LAGOON DRIVE	ont and title if applicable. (NOTE: ND DIRECTORS	13. 1.1 TIT 1.2 NA 1.3 STI	Agent sig LE ME REET AD	gnature required	d when reinstating)			TORS IN 12
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN PD MACKEY, WALTER J JR 772 LAGOON DRIVE NORTH PALM BEACH FL 3340	ont and title if applicable. (NOTE:  ND DIRECTORS  DELETE	13. 1.1 TIT 1.2 NA 1.3 STI	Agent sign.  LE  ME  REET AD  IY-ST-Z	gnature required	d when reinstating)			TORS IN 12
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address, with all other like empowered. MALTER J. MACKEY, JR., PRESIDENT 4/21/99 561/684-8811 SIGNATURE:

6.4 CITY-ST-ZIP