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PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000072871

1. Corporation Name
ATLANTICA CONDOMINIUM RENTAL CORPORATION



Principal Place of Business Mailing Address
4801 SOUTH ATLANTIC AVENUE 4601 SOUTH ATLANTIC AVENUE
PONCE INLET FL 32127 PONCE INLET FL 32127

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/17/1998
4. FEI Number
59-3534692 Applied For
Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business 2a. Mailing Address
21 26
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 27
City & State City & State
23 28
Zip Country Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MORO, RICHARD J
6918 ALOMA AVENUE
WINTER PARK FL 32792

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Richard J. Moro* RICHARD J. MORO 1/9/99
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D DELETE
NAME MORO, RICHARD J
STREET ADDRESS 6918 ALOMA AVENUE
CITY-ST-ZIP WINTER PARK FL 32789
TITLE D DELETE
NAME EVANS, DAVID
STREET ADDRESS 4536 SOUTH CLYDE MORRIS, #1
CITY-ST-ZIP DAYTONA BEACH FL 32119-4017
TITLE D DELETE
NAME BEERY, LLOYD
STREET ADDRESS 1347 WEST PINE STREET
CITY-ST-ZIP ORLANDO FL 32805
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Change Addition
3.2 NAME BATH, ERIC
3.3 STREET ADDRESS 4601 S. ATLANTIC AVE
3.4 CITY-ST-ZIP PONCE INLET, FL. 32127
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE: *Eric Bath* REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/99 904-788-7782
Date Daytime Phone #

CR2E034 (1/98)