

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 717491

**FILED**  
**Mar 05, 2024**  
**Secretary of State**  
**6217068687CC**

**Entity Name:** THE ATRIUM ASSOCIATION INC.

**Current Principal Place of Business:**

3600 S. CONGRESS AVE.  
SUITE C  
BOYNTON BEACH, FL 33426

**Current Mailing Address:**

3600 S. CONGRESS AVE.  
SUITE C  
BOYNTON BEACH, FL 33426 US

**FEI Number:** 59-1351335

**Certificate of Status Desired:** No

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

ESTEBANEZ, ERIC  
3600 S. CONGRESS AVE.  
SUITE C  
BOYNTON BEACH, FL 33426 US

*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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            WITTUSEN, CHRIS  
Address        3600 S. CONGRESS AVE.  
                 SUITE C  
City-State-Zip: BOYNTON BEACH FL 33426

Title            TREASURER  
Name            HOPKINS, CAROL  
Address        3600 S. CONGRESS AVE.  
                 SUITE C  
City-State-Zip: BOYNTON BEACH FL 33426

Title            VP  
Name            FERRARO, LOU  
Address        3600 S. CONGRESS AVE.  
                 SUITE C  
City-State-Zip: BOYNTON BEACH FL 33426

Title            SECRETARY  
Name            GOLDMAN, FAINA  
Address        3600 S. CONGRESS AVE.  
                 SUITE C  
City-State-Zip: BOYNTON BEACH FL 33426

Title            DIRECTOR  
Name            CAMPBELL, TONY  
Address        3600 S. CONGRESS AVE.  
                 SUITE C  
City-State-Zip: BOYNTON BEACH FL 33426

Title            DIRECTOR  
Name            ANDERSON, CHARLENE  
Address        3600 S. CONGRESS AVE.  
                 SUITE C  
City-State-Zip: BOYNTON BEACH FL 33426

Title            DIRECTOR  
Name            PARISI, MARGARET  
Address        3600 S. CONGRESS AVE.  
                 SUITE C  
City-State-Zip: BOYNTON BEACH FL 33426

*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:** CHRIS WITTUSEN

**PRESIDENT**

**03/05/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date