2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 345681

Entity Name: ATLANTIC APARTMENTS, INC.

Current Principal Place of Business:

C/O CONSOLIDATED COMMUNITY MANAGEMENT, INC 7124 N NOB HILL RD

TAMARAC, FL 33321

Current Mailing Address:

C/O CONSOLIDATED COMMUNITY MANAGEMENT, INC 7124 N NOB HILL RD TAMARAC, FL 33321 US

FEI Number: 59-1385628 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HAMMEL, EDWARD SESQ. 6111 BROKEN SOUND PARKWAY NW SUITE 200 BOCA RATON, FL 33487 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Apr 16, 2015

Secretary of State

CC5379288607

Officer/Director Detail:

Title Title **PRESIDENT**

Name KOSLAGA, MARK Name LEVY, EMMANUEL

C/O CONSOLIDATED COMMUNITY C/O CONSOLIDATED COMMUNITY Address Address

MANAGEMENT, INC MANAGEMENT, INC 7124 N NOB HILL RD 7124 N NOB HILL RD

TAMARAC FL 33321 TAMARAC FL 33321 City-State-Zip:

Title DIRECTOR VALENTI, PAUL Name

Address C/O CONSOLIDATED COMMUNITY

MANAGEMENT, INC 7124 N NOB HILL RD

City-State-Zip: TAMARAC FL 33321

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

Electronic Signature of Signing Officer/Director Detail