

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2001 8:00 am
Secretary of State

0812760

DOCUMENT # P95000062469

1. Entity Name

ATLANTIS FUNDING CONCEPTS, INC.

02-13-2001 90286 001 *****8.75

02-13-2001 90286 002 ***150.00

Principal Place of Business

1695 W INDIANTOWN ROAD
 STE 29
 JUPITER FL 33458
 US

Mailing Address

PO BOX 296
 JUPITER FL 33468

26110



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 7250

Suite, Apt. #, etc.

City & State

City & State

JUPITER, FL

4. FEI Number

65-0599097

Applied For

Not Applicable

Zip

Country

Zip

Country

33468

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DIXON, GAYLE M
 1695 W INDIANTOWN ROAD
 STE 29
 JUPITER FL 33458

7. Name and Address of New Registered Agent

Name **RICHARD F. CHRISTIAN**
 Street Address (P.O. Box Number is Not Acceptable)
1695 W. INDIANTOWN RD # 29
 City **JUPITER** FL **33458**

8. 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 Richard F. Christian, Pres 1-16-2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** Delete
 NAME **CHRITIAN, RICHARD F**
 STREET ADDRESS **PO BOX 296**
 CITY-ST-ZIP **JUPITER FL 33468**

TITLE Change Addition
 NAME
 STREET ADDRESS **P.O. Box 7250**
 CITY-ST-ZIP **JUPITER, FL 33468-7250**

TITLE **VP** Delete
 NAME **JONES, PAULA M**
 STREET ADDRESS **PO BOX 296**
 CITY-ST-ZIP **JUPITE FL 33468**

TITLE Change Addition
 NAME
 STREET ADDRESS **P.O. Box 7250**
 CITY-ST-ZIP **JUPITER, FL 33468-7250**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
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 STREET ADDRESS
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TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-16-2001
Date Daytime Phone #

CR2E034 (10/00)