FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandr<u>a B. Mortham</u>

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000070884 (6)

ATLAN	TA OPEN C	HAMPIONSH	IP, INC.	• •					
Principal Place of Business Mailing Address									
7720 MERRILL ROAD 7720 MERRILL ROAD JACKSONVILLE FL 32277 JACKSONVILLE FL 32277							DO NOT WRITE IN THIS SPACE		
								3. Date Incorporated or Qualified	
ì								08/14/1997	
2. Principal Place of Business 2a. Mailing Address								4. FEI Number Applied For	
21	Place of Business It. #, etc. At a country 25 9. Name and Address of Current (ALUBY, SARWAT 1720 MERRILL ROAD JACKSONVILLE FL 32277 At to the provisions of Sections 607.0502 Tregistered agent, or both, in the State of am familiar with, and accept the obligate		26					59-3496022 Not Applicable	
Suite, Apt.	#, etc.			Suite, Apt. #, etc.				Certificate of Status Desired S8.75 Additional	
22	27							Fee Required	
City & Stat	e		⊢	City & State				Election Campaign Financing \$5.00 May Be	
23		28	28				Trust Fund Contribution Added to Fees		
Zip	<u> </u>	n ´	<u> </u>	Zip	Coun	try	!	8. This corporation owes or has paid the current year Intangible	
24	25 29 9. Name and Address of Current Registered Agent				30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
			neut vedu	Holed Agent		91]	Name	(U. Hallie Bild Acciess Of New Registered Agent	
					L				
					[1	32	Street Add	Address (P.O. Box Number is Not Acceptable)	
MOROONVILLE PL 32277				Ì	83				
						84 City		EI 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,						L	e-named cor	orporation submits this statement for the purpose of changing its registered	
office or i	registered agenl ım familiar with.	t, or both, in the S and accept the pl	tate of Flori bligations o	da. Such change was a lf. Section 607.0505. Fla	authorized orida Statu	by	the corpora	ration's board of directors. I hereby accept the appointment as registered	
SIGNATURE	arricaring viii.	and hoodpit the of	inguions c	,, 000, 100, 100, 110	J. 100 01010	100			
SIGNATURE	Signature, typed or p	Printed harne of registerer	d agent and lilk	d applicable. (NOT	E Registered	Age	ent signature requ	quired when reinstating) DATE	
12.	OFFICERS AND DIRECTORS							ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT					£		Change Addition	
NAME	JACQUELINE L. WALLS					Æ			
STREET ADDRESS	4087	AUDUBO	N PR	PR RGIA 30068			ADDRESS		
CITY-ST-ZIP	MARI	18 300 PR	1.4 CIT 2.1 TITL	_	T-ZIP				
TITLE	V. PRESIDENT							Change Addition	
NAME	SIMONE SODANO					AE 			
	SIMONE SCHANO 625 WOODS HALLOW LANE						ADDRESS		
CITY-ST-ZIP TITLE	POWELL, OHIO 43065 DELETE					Y-S .E	ST-ZIP	☐ Change ☐ Addition	
NAME	· · · ·						İ	C. Citaligo C. Modelli	
STREET ADDRESS	[3.2 NAM 3.3 STR		ADDRESS		
CITY-ST-ZIP						3.4. CITY-ST-ZIP			
	SECRETARY DELETE					4.1 TITLE		Change Addition	
NAME	DEBRA ANN' AVALOS					4. 2 NAME			
STREET ADDRESS						4.3 STREET ADDRESS			
CITY-S1-ZIP	ATLANTA GEORGIA 30339.				- 1	4.4 CITY-ST-ZIP			
TITLE	DELETE					5.1 TITLE		Change Addition	
NAME					5.2 NAN	Æ			
STREET ADDRESS	ł				5.3 STR	EET	ADDRESS		
CITY-ST-ZIP					5.4 CIT	۲-S	iT-ZIP		
TITLE				DELETE	6.1 TITE			Change Addition	
NAME	f				6.2 NAA	ΛE	1		

1. 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 suppliemental 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

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIP

904)745-5000

FILED

Apr 14 1998 8:00am

Secretary of State