2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2005 08:00 AM
Secretary of State

DOCUMENT # F97000002558

1. Entity Name
ATLANTIC FINANCIAL MANAGERS, INC.

Principal Place of Business	Mailing Address
2808 FAIRMOUNT SUITE 250, LB9 DALLAS, TX 75201	2808 FAIRMOUNT SUITE 250, LB9 DALLAS, TX 75201

DO NOT WRITE IN THIS SPACE

03102005 No Chg-P CR2E034 (10/03)

4. FEI Number
75-2637933
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	BROOKSHIRE, STEPHEN S
STREET ADDRESS	2808 FAIRMOUNT SUITE 250 LB9
CITY-ST-ZIP	DALLAS, TX 75201
TITLE	D
NAME	REILLY, MICHAEL A
STREET ADDRESS	1000 BALLPARK WAY, STE 304
CITY-ST-ZIP	ARLINGTON, TX
TITLE	V
NAME	REILLY III, T W
STREET ADDRESS	1000 BALLPARK WAY, STE 304
CITY-ST-ZIP	ARLINGTON, TX
TITLE	S
NAME	BRAWNER, JEFFREY B
STREET ADDRESS	2808 FAIRMOUNT SUITE 250 LB9
CITY-ST-ZIP	DALLAS, TX 75201
TITLE	DOFA
NAME	KEATH, PATRICIA W
STREET ADDRESS	2808 FAIRMOUNT SUITE 250 LB9
CITY-ST-ZIP	DALLAS, TX 75201
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/02/05-80043-018 150.00

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ PRESIDENT 3/29/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
STEPHEN BROOKSHIRE