

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V34578

Entity Name: ATRIUM REGISTERED AGENTS, INC.

FILED
Apr 14, 2014
Secretary of State
CC7047000820

Current Principal Place of Business:

1500 SAN REMO AVENUE
SUITE 125
CORAL GABLES, FL 33146

Current Mailing Address:

1500 SAN REMO AVENUE
SUITE 125
CORAL GABLES, FL 33146 US

FEI Number: 65-0360003

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHARE, LESLIE A.
1500 SAN REMO AVENUE
SUITE 125
CORAL GABLES, FL 33146 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 P
Name NEUWAHL, MALCOLM H
Address 1500 SAN REMO AVENUE, #125
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name ROSENBERG, MICHAEL
Address 1500 SAN REMO AVENUE, #125
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name GINSBURG, DENNIS
Address 1500 SAN REMO AVENUE, #125
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name STAMEN, ROBERT A
Address 1500 SAN REMO AVENUE, #125
City-State-Zip: CORAL GABLES FL 33146

Title VPS
Name SHARE, LESLIE A
Address 1500 SAN REMO AVENUE, #125
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name FINKELMAN, JACK D
Address 1500 SAN REMO AVENUE, #125
City-State-Zip: CORAL GABLES FL 33146

Title D
Name STEINMAN, N. ALLAN
Address 1500 SAN REMO AVENUE
SUITE 125
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name STARKMAN, MARK R
Address 1500 SAN REMO AVENUE
SUITE 125
City-State-Zip: CORAL GABLES FL 33146

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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.

SIGNATURE: N. ALLAN STEINMAN

D

04/14/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name NUNEZ, JOSE L
Address 1500 SAN REMO AVENUE
SUITE 125
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name NARDI, RALPH
Address 1500 SAN REMO AVENUE
SUITE 125
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name WOLF, SHAWN
Address 1500 SAN REMO AVENUE
SUITE 125
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name ROSENBERG, TODD
Address 1500 SAN REMO AVENUE
SUITE 125
City-State-Zip: CORAL GABLES FL 33146