

2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000005078

FILED
Mar 18, 2016
Secretary of State
CC2490858450

Entity Name: THE ATLANTIC INSTITUTE OF FLORIDA INC

Current Principal Place of Business:

115 PERIMETER CENTER PLACE
STE 435
ATLANTA, GA 30346-1275

Current Mailing Address:

115 PERIMETER CENTER PLACE
STE 435
ATLANTA, GA 30346-1275 US

FEI Number: 46-1605287

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YUCEKAYA, MUSTAFA
2500 WEST SAMPLE ROAD
POMPANO BEACH, FL 33073 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: MUSTAFA YUCEKAYA

03/18/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name KALAYCI, ALTAN
Address 115 PERIMETER CENTER PLACE
 STE 435
City-State-Zip: ATLANTA GA 30346-1275

Title VP
Name KORUCU, MEHMET K
Address 115 PERIMETER CENTER PLACE
 STE 435
City-State-Zip: ATLANTA GA 30346-1275

Title MEMBER
Name SAHIN, MUSTAFA G
Address 115 PERIMETER CENTER PLACE
 STE 435
City-State-Zip: ATLANTA GA 30346-1275

Title TREASURER
Name BABANAZAROV, BAHTIYAR
Address 115 PERIMETER CENTER PLACE
 STE 435
City-State-Zip: ATLANTA GA 30346-1275

Title SECRETARY
Name KORUCU, MEHMET K
Address 115 PERIMETER CENTER PLACE
 STE 435
City-State-Zip: ATLANTA GA 30346-1275

Title CEO
Name KILIC, TURAN
Address 115 PERIMETER CENTER PLACE
 STE 435
City-State-Zip: ATLANTA GA 30346-1275

Title EXECUTIVE DIRECTOR
Name YUCEKAYA, MUSTAFA
Address 2500 WEST SAMPLE ROAD
City-State-Zip: POMPANO BEACH FL 33073

Title EXECUTIVE DIRECTOR
Name GUNEBIR, UMUT
Address 115 PERIMETER CENTER PLACE
 STE 435
City-State-Zip: ATLANTA GA 30346-1275

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

SIGNATURE: ALTAN KALAYCI

PRESIDENT

03/18/2016

Electronic Signature of Signing Officer/Director Detail

Date