


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 30, 2007 08:00 AM
Secretary of State

DOCUMENT # 174389 1. Entity Name ATLAS MORTGAGE & INSURANCE CO INC	
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Principal Place of Business 7120 BENEVA ROAD SARASOTA, FL 34238 US	Mailing Address 7120 BENEVA ROAD SARASOTA, FL 34238 US
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01192007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-0700799	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent BROWN ROBERT P. 7120 BENEVA ROAD SARASOTA, FL 34237 34238

**DO NOT WRITE
IN THIS SPACE**

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 *Robert P. Brown*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/26/07
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BROWN, ROBERT P. 7120 BENEVA ROAD SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BROWN, MARY E 7120 BENEVA ROAD SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BROWN, ROBERT W 7120 BENEVA ROAD SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HOWARD, DARREN B 7120 BENEVA ROAD SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KOCHIS, THOMAS W 7120 BENEVA ROAD SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000684017
04/06/07-80015-017 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Robert P. Brown*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/07 941 366 8424
Date Daytime Phone