FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -1 AM 11:24

DOCUMENT # 210250 (7)

1. Corporation Name
ATLANTIC RIDGE CORPORATION

Principal Place of Business
3055 CARDINAL DRIVE, SUITE 201A
VERO BEACH FL 32963

Mailing Address
3055 CARDINAL DRIVE, SUITE 201A
VERO BEACH FL 32963

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/04/1958
3a. Date of Last Report: 03/01/1994

2. Principal Place of Business
21 5070 N A1A
Suite, Apt. #, etc.
22 Suite 205
City & State
23 Vero Beach Fl
Zip 24 32963
Country 25 USA

2a. Mailing Address
26 5070 N A1A
Suite, Apt. #, etc.
27 Suite 205
City & State
28 Vero Beach Fl
Zip 29 32963
Country 30 USA

4. FEI Number: 59-0902445 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
RILEY, JR HOWARD W
3055 CARDINAL DRIVE, SUITE 201
VERO BEACH FL 32963

10. Name and Address of New Registered Agent
81 Name: DANIEL W. NELSON
82 Street Address (P.O. Box Number is Not Acceptable): 5070 N. A1A Suite 205
83
84 City: VERO BEACH FL 85 Zip Code: 32963

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Daniel W. Nelson — 1-24-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	RILEY JR, HOWARD W
STREET ADDRESS	233 BINNACLE PT.
CITY-ST-ZIP	VERO BCH, FL 00000
TITLE	VSD
NAME	NELSON, DANIEL W
STREET ADDRESS	880 OYSTER SHELL LANE
CITY-ST-ZIP	VERO BCH, FL 00000
TITLE	VTD
NAME	RILEY, FREDERICK R
STREET ADDRESS	8049 MONETAR DR., D-4
CITY-ST-ZIP	RIVIERA BCH. FL
TITLE	AS
NAME	RAWLS, B.D.
STREET ADDRESS	4649 PONCE DELEON BLVD.
CITY-ST-ZIP	CORAL GABLES FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 addition.

SIGNATURE: Daniel W. Nelson — 1-24-95 — 407-234-1690
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0071011 CP