

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 312129

FILED  
Jan 11, 2004  
Secretary of State

Entity Name: ATLANTIC DIESEL SERVICE, INC.

## Current Principal Place of Business:

STATE ROAD #621 EAST  
POST OFFICE BOX 993  
LAKE PLACID, FL 33852

## Current Mailing Address:

P. O. BOX 993  
POST OFFICE BOX 993  
LAKE PLACINO, FL 33862 US

FEI Number: 59-1160304

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NIEMAN, MAX A.  
STATE ROAD 621E  
POST OFFICE BOX 993  
LAKE PLACID, FL 33852

## New Principal Place of Business:

830 COUNTY ROAD 621 EAST  
POST OFFICE BOX 993  
LAKE PLACID, FL 33852

## New Mailing Address:

P. O. BOX 993  
POST OFFICE BOX 993  
LAKE PLACID, FL 33862 US

## Name and Address of New Registered Agent:

NIEMAN, BETTY M.  
830 COUNTY ROAD 621E  
POST OFFICE BOX 993  
LAKE PLACID, FL 33852

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: BETTY M. NIEMAN

01/11/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: NIEMAN, MAX A.,  
Address: STATE ROAD 621E  
City-St-Zip: LAKE PLACID, FL

Title: STD ( ) Delete  
Name: NIEMAN, BETTY M.,  
Address: STATE ROAD 621E  
City-St-Zip: LAKE PLACID, FL

Title: VPD ( ) Delete  
Name: EICHHORN, GEORGINA C.,  
Address: LAKE CLAY DR.  
City-St-Zip: LAKE PLACID, FL

Title: D (X) Delete  
Name: EICHHORN, GERALD,  
Address: LAKE CLAY DR.  
City-St-Zip: LAKE PLACID, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: NIEMAN, BETTY M.,  
Address: 830 COUNTY ROAD 621E  
City-St-Zip: LAKE PLACID, FL 33852 US

Title: STD (X) Change ( ) Addition  
Name: EICHHORN, GEORGINA C.,  
Address: 830 COUNTY ROAD 621E  
City-St-Zip: LAKE PLACID, FL 33852 US

Title: VPD (X) Change ( ) Addition  
Name: EICHHORN, GERALD,  
Address: 830 COUNTY ROAD 621 E  
City-St-Zip: LAKE PLACID, FL 33852 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: BETTY M. NIEMAN

PD

01/11/2004

Electronic Signature of Signing Officer or Director

Date