2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 420102

Entity Name: ATOM, INC.

FILED Feb 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10661 HABITHATTRAIL 5562 BAY POINT RD.
BOKEELIA, FL 33922 US BOKEELIA, FL 33922 US

Current Mailing Address: New Mailing Address:

PO BOX 336

PINELAND, FL 33945 US

FEI Number: 59-1500827 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SLAGLE, THOMAS E.

10661 HABITAT TRAIL

BOKEELIA, FL 33922 US

SLAGLE, THOMAS E PRES
5562 BAY POINT RD.

BOKEELIA, FL 33922 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: THOMAS E. SLAGLE 02/09/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST () Delete Title: (X) Change () Addition SLAGLE, THOMAS E., SLAGLE, THOMAS E PRES Name: Name: 10661 HABITAT TRAIL 5562 BAY POINT RD. Address: Address: City-St-Zip: BOKEELIA, FL 33922 City-St-Zip: BOKEELIA, FL 33922

Title: VD () Delete Title: VD (X) Change () Addition

Name: HOBBY, GERALD, Name: HOBBY, GERALD VPD

Address: 18260 MATT RD Address: 18260 MATT RD

City-St-Zip: NORTH FORT MYERS, FL 33903 City-St-Zip: NORTH FORT MYERS, FL 33903

 Title:
 AST
 () Delete
 Title:
 AST
 (X) Change () Addition

 Name:
 NEELD, ROBERT M., JR, .
 Name:
 NEELD, JR., ROBERT M AST

 Address:
 1408, SE 14TH ST
 Address:
 1408, SE 14TH ST

 Address:
 1426 SE 44TH ST.
 Address:
 1426 SE 44TH ST.

 City-St-Zip:
 CAPE CORAL, FL 33904
 City-St-Zip:
 CAPE CORAL, FL 33904

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: THOMAS E. SLAGLE PRES 02/09/2007