

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003466

FILED  
Feb 23, 2011  
Secretary of State

**Entity Name:** ATLANTIC TESTING LABORATORIES, LIMITED, INC.

**Current Principal Place of Business:**

6431 U.S. HIGHWAY 11  
CANTON, NY 13617

**New Principal Place of Business:**

**Current Mailing Address:**

6431 U.S. HIGHWAY 11  
PO BOX 29  
CANTON, NY 13617

**New Mailing Address:**

**FEI Number:** 16-1109111      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KELLY, SUSAN E  
2600 HARDEN BLVD., LOT #71  
LAKELAND, FL 33803 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: REMINGTON, MARIJEAN B  
Address: 6431 U.S. HIGHWAY 11  
City-St-Zip: CANTON, NY 13617

Title: VPTD  
Name: KUHN, JAMES J P.E.  
Address: 22 CORPORATE DRIVE  
City-St-Zip: CLIFTON PARK, NY 12065

Title: D  
Name: BUNDLE, THOMAS R  
Address: 6085 COURT STREET ROAD, SUITE A  
City-St-Zip: SYRACUSE, NY 13206

Title: VPD  
Name: RODERICK, CHRISTIAN J  
Address: 26581 NYS ROUTE 283  
City-St-Zip: WATERTOWN, NY 13601

Title: VPSD  
Name: MCCASLAND, SCOTT M  
Address: 301 ST. ANTHONY STREET  
City-St-Zip: UTICA, NY 13501

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

SIGNATURE: JAMES J KUHN

VPTD

02/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date