FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



DOCUMENT # F9600005964

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90115 050 ***150.00

1. Corporation ATLANTIC	DATA SERVICES, INC.		;		
Principal Place	of Business	Mailing Address		- I fallisa ille laus antti aniti ansti antii anit	t Blifft firit iftig fittl giff iner
1 BATTERYMARCH PARK OUINCY MA 02169 1 BATTERYMARCH PARK OUINCY MA 02169				DO NOT WRITE IN TH	S SPACE
			\	3. Date Incorporated or Qualifed	3 31 AGE
			7	10/29/1996	
n Di-i-i-al Di	ace of Business	2a. Mailing Address	1	4. FEI Number	Applied For
·	ace of Busiless	26	, \	04-2696393	Not Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	``	6. Election Campaign Financing	\$5.00 May Be
23		28	1	Trust Fund Contribution	Added to Fees
Zip	Country 25	Zip 29	Country \	8. This corporation owes the current year I Personal Property Tax.	Yes : ; No '
24]	Name and Address of Currer			10. Name and Address of New Registere	d Agent
		,	81 Name		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
PLAN	ITATION FL 33324		83		,
		,	84 City		85 Zip Code
		/	1 1 1	pration submits this statement for the purpose	
office of re agent. I ar	egistered agent, or both, in the State m familiar with, and accept the obligation Signature, typed or printed name of registered age	ations of, Section 607.0505, Fl		J when reinstating) \ DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	Change Addition
TITLE	PDC	☐ DELETE	1.1 TITLE	\	C onlarige
NAME	GALLAGHER, WILLIAM H		1.2 NAME	1	
STREET ADDRESS	1 BATTERYMARCH PARK		1.3 STREET ADDRESS	\	
CITY-ST-ZIP	QUINCY MA 02169	FA .DELETE	1.4 CITY-ST-ZIP 2.1 TITLE C ►	00	☐ Change
TITLE	OCCUPANT CHEANT	DECOCCE IC		1. m. boroth	
NAME	GORMAN, SUSAN L		2.3 STREET ADDRESS 4	Battery march fack	•
STREET ADDRESS	1 BATTERYMARCH PARK QUINCY MA 02169			6,000 MA 02169	
CITY-ST-ZIP TITLE	DC	☐ DELETE	3.1 TITLE	SWA WIN STO	Change Addition
	GALLAGHER, WILLIAM H		3.2 NAME		
NAME			3.3 STREET ADDRESS		
STREET ADDRESS	QUINCY MA 02169		3.4. CITY-ST-ZIP		
CITY-ST-ZIP TITLE	D D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	KENNEDY, LEE M		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	QUINCY MA 02169		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	HODGSON, DAVID		5.2 NAME		
STREET ADDRESS	1 BATTERYMARCH PARK		5.3 STREET ADORESS		
CITY-ST-ZIP	QUINCY MA 02169		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	RAYMOND, GEORGE		6.2 NAME		
STREET ADDRESS	A DATEDWALLDOLL DADIC		6.3 STREET ADDRESS		
CITY-ST-ZIP	QUINCY MA 02169	_	6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 namelock 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.