

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K42076

FILED
Apr 26, 2004
Secretary of State

Entity Name: AMERICAN TRAINING INSTITUTE, INC.

Current Principal Place of Business:

POST OFFICE BOX 2116
DAYTONA BEACH, FL 32115

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 2116
DAYTONA BEACH, FL 32115

New Mailing Address:

4365 OKEECHOBEE BLVD. # B12
WEST PALM BEACH, FL 33409

FEI Number: 59-2998713

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JONES, ROBERT
137 ORANGE AVE.
DAYTONA BEACH, FL 32014 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: O'NEAL, TED
Address: 60 SEWARD #45.
City-St-Zip: DETROIT, MI

Title: T () Delete
Name: ANDERSON, HARVEY
Address: 94 ST. ANN CIR.
City-St-Zip: ORMOND BEACH, FL

Title: SP () Delete
Name: NEAL, JOHN SR.
Address: 137 ORANGE AVE.
City-St-Zip: DAYTONA BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JOHN NEAL

MR.

04/26/2004

Electronic Signature of Signing Officer or Director

Date