

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000014752

FILED  
Jan 13, 2006  
Secretary of State

Entity Name: ATLAST FINANCIAL SERVICES, L.L.C.

**Current Principal Place of Business:**

822 NORTH HWY A1A  
BLDG. C STE 207  
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

**Current Mailing Address:**

822 NORTH HWY A1A  
BLDG. C STE. 207  
PONTE VEDRA BEACH, FL 32082

**New Mailing Address:**

FEI Number: 59-3741101

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATE CREATIONS NETWORK, INC.  
941 FOURTH STREET #200  
MIAMI BEACH, FL 33139 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CAMPANARO, RICHARD G  
Address: 10 MEADOWVIEW AVE  
City-St-Zip: LINWOOD, NJ 08221

Title: MGRM ( ) Delete  
Name: CAMPANARO, RICHARD W  
Address: 333 JACKSONVILLE DRIVE  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: CAMPANARO, RICHARD W  
Address: 822 N HWY A1A SUITE 207  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RICHARD W CAMPANARO

CEO

01/13/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date