2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000018373

1. Entity Name

ATLANTIC INVESTMENTS, L.L.C.

Principal Place of Business

457 SAVOIE DRIVE

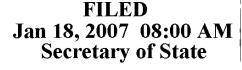
PALM BEACH GARDENS, FL 33410

Mailing Address

6817 SOUTHPOINT PARKWAY

SUITE 601

JACKSONVILLE, FL 32216





01152007 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number	Applied For
	81-0566478	Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

MANAGING MEMBERS MAANAGERS

WILLIAMS, BOBBY'R JR 6817 SOUTHPOINT PKWY SUITE 601 JACKSONVILLE, FL 32216

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8.	The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of the obligations of registered agent.	Florida. I am familiar with, and accept
SI	SIGNATURE	

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007

5.	MANAGING MEMBERS/MANAGERS
TITLE NAME	MGRM KNIGHT, DAVID M
STREET ADDRESS	457 SAVOIE DRIVE
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410
TITLE	MGRM
NAME	KNIGHT, TILLIE J
STREET ADDRESS	457 SAVOIE DRIVE
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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TITLE	, -
NAME	
STREET ADDRESS	` .
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 trusted emboursed to execute this report as required by Chapter 608. Florida Statutes.