

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000025667

Entity Name: ATLANTIC STONE, LLC

FILED
Jun 14, 2004
Secretary of State

Current Principal Place of Business:

3426 ORCHARD WALK PLACE
JACKSONVILLE, FL 32257

New Principal Place of Business:

6694-2 COLUMBIA PARK DR S
JACKSONVILLE, FL 32258

Current Mailing Address:

3426 ORCHARD WALK PLACE
JACKSONVILLE, FL 32257

New Mailing Address:

6694-2 COLUMBIA PARK DR S
JACKSONVILLE, FL 32258

FEI Number: 13-4213401

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKEL, EDWARD C
ONE INDEPENDENT DRIVE, SUITE 2301
JACKSONVILLE, FL 32202 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/MEMBERS:

Title: MGR () Delete
Name: PETTIT, NATALIE D
Address: 3426 ORCHARD WALK PLACE
City-St-Zip: JACKSONVILLE, FL 32257

Title: MGR () Delete
Name: PETTIT, DAVID M
Address: 3426 ORCHARD WALK PLACE
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PETTIT, NATALIE D
Address: 1117 STONEHEDGE TRL LN
City-St-Zip: ST AUGUSTINE, FL 32092

Title: MGR (X) Change () Addition
Name: PETTIT, DAVID M
Address: 1117 STONEHEDGE TRL LN
City-St-Zip: ST AUGUSTINE, FL 32092

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 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: NATALIE D PETTIT

MRS

06/14/2004

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