## 2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L02000025667

Entity Name: ATLANTIC STONE, LLC

FILED Sep 06, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6684-6 COLUMBIA PARK DR S JACKSONVILLE, FL 32258

Current Mailing Address: New Mailing Address:

190 ROCKLAND DRIVE 6684-6 COLUMBIA PARK DR. S. NEW BRAUNFELS, TX 78132 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: Name and Address of New Registered Agent:

AKEL, EDWARD C
ONE INDEPENDENT DRIVE, SUITE 2301

KEMP, MICHAEL C
1872 ARDEN WAY

JACKSONVILLE, FL 32202 US JACKSONVILLE BCH, FL 32250 US

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: MICHAEL C. KEMP 09/06/2007

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

e: MGR ( ) Delete

Name: PETTIT, NATALIE D Address: 6684-6 COLUMBIA PARK DR S

City-St-Zip: JACKSONVILE, FL 32258

Title: MGR () Delete Name: PETTIT, DAVID M

Address: 6684-6 COLUMBIA PARK DR S

City-St-Zip: JACKSONVILLE, FL 32258

Title: ( ) Delete

Name: Address: City-St-Zip:

Title: ( ) Delete

Name: Address: City-St-Zip: ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition

Name: KEMP, MICHAEL C Address: 1872 ARDEN WAY

City-St-Zip: JACKSONVILE BEACH, FL 32250

Title: VP (X) Change ( ) Addition

Name: KEMP, CYNTHIA M Address: 1872 ARDEN WAY

Address. 1072 ARDEN WAT

City-St-Zip: JACKSONVILLE BCH, FL 32250

 $\begin{array}{lll} \hbox{Title:} & \hbox{CFO} & \hbox{( ) Change (X) Addition} \\ \hbox{Name:} & \hbox{PLUCKNETT, JANICE S} \end{array}$ 

Address: 14065 WAVERLY FALLS LN City-St-Zip: JACKSONVILLE, FL 32224

Title: CFO ( ) Change (X) Addition

Name: PLUCKNETT, DENNIS A
Address: 14065 WAVERLY FALLS
City-St-Zip: JACKSONVILLE, FL 32224

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL C. KEMP GM 09/06/2007