## 2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## Mar 20, 2008 8:00 am Secretary of State **DOCUMENT # L05000023913** 03-20-2008 90182 020 \*\*\*138.75 ATLANTIC INVESTORS, LLC Principal Place of Business Mailing Address 2220 FRONT ST. 2220 FRONT ST. #201 #201 MELBOURNE, FL 32901 MELBOURNE, FL 32901 3. Mailing Address 2. Principal Place of Business - No P.O. Box # 2117 S. BABCOCK ST 2117 S. BABCOCK ST Suite, Apt. #, etc. Suite, Apt. #, etc. ポ /<u>50</u> 03142008 Cha-LLC CR2E083 (12/06) # 150 Applied For City & State City & State 4. FEI Number MELBOURNE MCLBOURNE 20-2495517 Not Applicable Country Country \$5.00 Additional 5. Certificate of Status Desired 32 90/ 32901 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ABLING MADELIENE Street Address (P.O. Box Number is Not Acceptable) ABLING, MADELIENE 2220 FRONT ST. #201 MELBOURNE, FL 32901 150 Zip Code 32 90 / City MEL BOUTH 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 Florida. I am familiar with, and accept the obligations of registered agent. FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MGRM TITLE Oelete TITLE ☐ Addition RAFTER, KATHRYN NAME NAME STREET ADDRESS 10141 BETTY JANE LANE STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75229 CITY-ST-ZIP **MGRM** ☐ Delete TITLE ☐ Change TITLE ☐ Addition **BEALL, MARY FRANCES** NAME NAME STREET ADDRESS 10141 BETTY JANE LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS, TX 75229 MGRM MGRM Defete TITLE Change TITLE ☐ Addition KEITH, VICKY KEITH, VICKY NAME 5. BABOOCK ST # 150 STREET ADDRESS 2220 FRONT ST. #201 STREET ADDRESS MELBOURNE, FL 32901 CITY-ST-ZIP MEL BOURNE, FL CITY-ST-ZIP MURM ☐ Delete TITLE Change TITLE MGRM ☐ Addition MADELIENE ABLING ABLING, MADELIENE NAME ST # 150 2117 S. BABCOCK STREET ADDRESS 2220 FRONT ST. #201 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MELBOURNE, FL 32901 MELBOURNE, FL 32 901 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED