

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000110805

Entity Name: ATLAS TRUST, LLC

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

428 CHILEAN AVENUE  
PALM BEACH, FL 33480

**New Principal Place of Business:**

2560 S OCEAN BLVD  
611  
PALM BEACH, FL 33480

**Current Mailing Address:**

428 CHILEAN AVENUE  
PALM BEACH, FL 33480

**New Mailing Address:**

2560 S OCEAN BLVD  
611  
PALM BEACH, FL 33480

FEI Number: 36-4680180

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

HESS, EPHRAIM R P.A.  
2924 DAVIE ROAD  
202  
DAVIE, FL 33314 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  
Name: JOURNEY, JACQUELINE R  
Address: 2560 S OCEAN BLVD #611  
City-St-Zip: PALM BEACH, FL 33480

Title: MGRM  
Name: PEETZ, MICHAELA  
Address: TUSSMANNSTR. 4  
City-St-Zip: DUESSELDORF, GERMANY, XX D-40477

I hereby 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: JACQUELINE R JOURNEY

MGRM

04/26/2012

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