

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000001991

FILED  
May 02, 2007  
Secretary of State

Entity Name: ATLANTIC GOVERNMENT SERVICES, L.L.C.

**Current Principal Place of Business:**

5426 ROBIN HOOD RD.  
NORFOLK, VA 235132447

**New Principal Place of Business:**

**Current Mailing Address:**

5426 ROBIN HOOD RD.  
NORFOLK, VA 235132447

**New Mailing Address:**

FEI Number: 54-1978879      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MCLAUGHLIN, DENNIS  
Address: 1712 HERFORD WAY  
City-St-Zip: VIRGINIA BEACH, VA 23454

Title: MGRM ( ) Delete  
Name: WARREN, GEORGE H  
Address: 1610 YORK REST LANE  
City-St-Zip: BENA, VA 23018

Title: MGRM (X) Delete  
Name: GROSS, THOMAS H  
Address: 816 DE LA FAYETTE CT  
City-St-Zip: VIRGINIA BEACH, VA 23455

Title: MGRM (X) Delete  
Name: HAHN, ROBERT B  
Address: 3650 SEA GULF BLUFF  
City-St-Zip: VIRGINIA BEACH, VA 23455

Title: MGRM (X) Delete  
Name: HOLLORAN, WILLIAM J JR  
Address: 1105 BORG CT  
City-St-Zip: VIRGINIA BEACH, VA 23464

Title: MGRM (X) Delete  
Name: JOHNSON, RAY N  
Address: 2709 WINDSHIP POINT  
City-St-Zip: VIRGINIA BEACH, VA 23454

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: HOLMES, WILLIAM R  
Address: 1818 MARKET ST  
City-St-Zip: PHILADELPHIA, PA 19103

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: GEORGE H. WARREN

MGRM

05/02/2007

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