

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003997

Entity Name: ATLANTIC BLVD., LLC

FILED  
Jul 06, 2006  
Secretary of State

## Current Principal Place of Business:

2839 PACES FERRY ROAD  
STE 560  
ATLANTA, GA 30339

## New Principal Place of Business:

210 ST JOHNS BLUFF ROAD  
JACKSONVILLE, FL 32225

## Current Mailing Address:

2839 PACES FERRY ROAD  
STE 560  
ATLANTA, GA 30339

## New Mailing Address:

FEI Number: 41-2042731      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:

WEATHERLY, JOE  
210 ST JOHNS BLUFF ROAD  
JACKSONVILLE, FL 32225      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      ( ) Delete  
Name: LAHOOD, GEORGE J JR  
Address: 470 FELLOWSHIP HOME LANE  
City-St-Zip: VALDOSTA, GA 31602

Title: MGRM      ( ) Delete  
Name: BOWEN, WILLIAM  
Address: 2839 PACES FERRY ROAD  
City-St-Zip: ATLANTA, GA 30339

## ADDITIONS/CHANGES:

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 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: WILLIAM BOWEN

MGRM

07/06/2006

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