### 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

### DOCUMENT # M04000003113

1. Entity Name

ATLANTIC AMERICAN CORPORATE GROUP, LLC



Principal Place of Business

Mailing Address

101 EAST KENNEDY BLVD., SUITE 3300 TAMPA, FL 33602

101 EAST KENNEDY BLVD., SUITE 3300 TAMPA, FL 33602

## FILED Jan 19, 2007 8:00 am Secretary of State

01-19-2007 90064 027 \*\*\*\*50.00

60004098



01082007 No Chg-LLC

CR2E083 (11/05)

Į				
	4. FEI Number	•	Applied For	
	59-3659243		Not Applicabl	
	5. Certificate of Status Desired		\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

GORDON, BRAD A 101 EAST KENNEDY BLVD., SUITE 3300 TAMPA, FL 33602

# DO NOT WRITE IN THIS SPACE

	the obligations of registered agent.	nanging its registered blince or registered agent, or both, in the State of Florida	. Talifialililai with, and accept
SIC	SNATURE		
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE

#### Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS		
THILE	MGRM		
NAME ATLANTIC AMERICAN HOLDINGS, INC. STREET ADDRESS 101 E. KENNEDY BLVD., STE 3300			
TITLE	MGR		
NAME COLONIAL PARK PROPERTY HOLDING, LLC			
STREET ADDRESS 101 E. KENNEDY BLVD., STE 3300			
CITY-ST-ZIP	TAMPA, FL 33602		
TITLE	MGR		
NAME	4C PARTNERS LP		
STREET ADDRESS	101 E. KENNEDY BLVD., STE 3300		
CITY - ST-ZIP	TAMPA, FL 33602		
TITLE	MGR		
NAME	BAG HOLDINGS, LLC		
STREET ADDRESS	101 E. KENNEDY BLVD., STE 3300		
CITY - ST - ZIP	TAMPA, FL 33602		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

# DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling 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.

CL	$\sim M$	ATI	IRF.

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

1117/07

813-226-8844

Daytime Pho