

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M99538

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Entity Name:** ATLANTIC ADVERTISING GROUP, INC.

**Current Principal Place of Business:**

3101 SAWGRASS VILLAGE CIRCLE  
PONTE VEDRA BEACH, FL 32082 US

**New Principal Place of Business:**

2757 TREASURE COVE LANE  
JACKSONVILLE, FL 32224 US

**Current Mailing Address:**

3101 SAWGRASS VILLAGE CIRCLE  
PONTE VEDRA BEACH, FL 32082 US

**New Mailing Address:**

2757 TREASURE COVE LANE  
JACKSONVILLE, FL 32224 US

**FEI Number:** 59-2909391

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POWERS, SUSAN  
2757 TREASURE COVE LANE  
JACKSONVILLE, FL 32224 US

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

POWERS, SUSAN S  
2757 TREASURE COVE LANE  
JACKSONVILLE, FL 32224 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:** SUSAN SANDERS POWERS

02/08/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** S  
**Name:** POWERS, SUSAN S  
**Address:** 2757 TREASURE COVE LANE  
**City-St-Zip:** JACKSONVILLE, FL 32224

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** SUSAN SANDERS POWERS

PRES

02/08/2012

Electronic Signature of Signing Officer or Director

Date