2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011887

FILED Apr 27, 2009 Secretary of State

Entity Name: ATIC & MG CENTER FOR EXCELLENCE INC

LINE NAME. AND & MIG CENTER FOR EXCELLENCE, INC.				
Current Principal Place of Business:			New Principal Place	of Business:
2077 LIONE VIERA, FL				
Current Mailing Address:			New Mailing Addres	s:
P.O. BOX 4 MELBOUR	111482 NE, FL 32941	1482		
FEI Number:	03-0553724	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
2077 LIONE VIERA, FL	32940 US named entity s		pose of changing its registere	d office or registered agent, or both,
SIGNATUR				
		ic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	, ,		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MALOON, CLEV 12863 63RD LA		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SD () GIBSON, SYMO 2077 LIONEL D VIERA, FL 329	RIVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	TD () JENKINS, VERO 734 WHITE PIN ROCKLEDGE, I	E COURT	Title: Name: Address: City-St-Zip:	() Change () Addition

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMICITIA I. MALOON-GIBSON CEO 04/27/2009