

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004966

FILED  
May 28, 2011  
Secretary of State

**Entity Name:** ATLANTIC INSTITUTE CORPORATION

**Current Principal Place of Business:**

1737 N.E. 17TH STREET  
FORT LAUDERDALE, FL 33305

**New Principal Place of Business:**

**Current Mailing Address:**

1737 N.E. 17TH STREET  
FORT LAUDERDALE, FL 33305

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

STEPHENSON, JERRY L DR.  
1737 N.E. 17TH STREET  
FORT LAUDERDALE, FL 33305 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: STEPHENSON, JERRY L  
Address: 1737 N.E. 17TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33305

Title: D  
Name: SIGNORELLI, MIRTA DR.  
Address: 236 PAR DRIVE  
City-St-Zip: ROYAL PALM, FL 33460

Title: D  
Name: SCHILLING, SHANNON  
Address: 216 LAKE POINT DR. APT. 227  
City-St-Zip: OAKLAND PARK, FL 33309

Title: D  
Name: CORNELL, HAROLD  
Address: 8240 S.W. 24TH STREET. APT. 5108  
City-St-Zip: N LAUDERDALE, FL 33068

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

SIGNATURE: JERRY L. STEPHENSON

DR.

05/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date