# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

# DOCUMENT# N99000003305

Entity Name: ATLANTIC STAFFING, INC.

FILED Feb 20, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1041 DUNLAWTON AVENUE 303 N. CLYDE MORRIS BLVD PORT ORANGE, FL 32119 DAYTONA BEACH, FL 32114

Current Mailing Address: New Mailing Address:

LEGAL DEPT. 303 N.CLYDE MORRIS BLVD DAYTON BEACH, FL 32114

FEI Number: 59-3577755 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:

DAVIDSON, DAVID J 303 NORTH CLYDE MORRIS BOULEVARD DAYTONA BEACH, FL 32114 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:

Floating Company of Designature of Asset

## Electronic Signature of Registered Agent

#### Date

### **OFFICERS AND DIRECTORS:**

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 C/D ( ) Delete
 Title:
 D (X) Change ( ) Addition

 Name:
 HALL, NORA
 Name:
 HALL, NORA

 Address:
 1316 OVERBROOK DRIVE
 Address:
 46 RIVER RIDGE TRAIL

Address: 1316 OVERBROOK DRIVE Address: 46 RIVER RIDGE TRAIL

City-St-Zip: ORMOND BEACH, FL 32174 US City-St-Zip: ORMOND BEACH, FL 32174 US

Title: S/D ( ) Delete Title: S/D (X) Change ( ) Addition

Name: QUINN, DON Name: QUINN, DON

Address: 211 N. RIDGEWOOD AVE., STE. 303 Address: 200 E. GRANADA BLVD., STE. 208
City-St-Zip: DAYTONA BEACH, FL 32114 US City-St-Zip: ORMOND BEACH, FL 32176 US

Title: D ( ) Delete Title: V/D (X) Change ( ) Addition

Name: CLOAR, VIVI Name: CLOAR, VIVI

Address: 360 JOHN ANDERSON DRIVE Address: 360 JOHN ANDERSON DRIVE
City-St-Zip: ORMOND BEACH, FL 32176 US City-St-Zip: ORMOND BEACH, FL 32176 US

Title: D () Delete Title: () Change () Addition

 Name:
 HOLNESS, BETTY
 Name:

 Address:
 21 SPRING MEADOW DRIVE
 Address:

 City-St-Zip:
 ORMOND BEACH, FL 32174 US
 City-St-Zip:

Title: D () Delete Title: T/D (X) Change () Addition

Name: KENNEDY, BRUCE M.D. Name: KENNEDY, BRUCE M.D.

Address: 411 LAKE BRIDGE PLAZA DRIVE Address: 411 LAKE BRIDGE PLAZA DRIVE
City-St-Zip: ORMOND BEACH, FL 32174 US City-St-Zip: ORMOND BEACH, FL 32174 US

Title: V/D ( ) Delete Title: C/D (X) Change ( ) Addition

Name:RITCHEY, GLENNName:RITCHEY, GLENNAddress:551 NORTH NOVA RD.Address:551 NORTH NOVA RD.

City-St-Zip: DAYTONA BEACH, FL 32114 US City-St-Zip: DAYTONA BEACH, FL 32114 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GLENN RITCHEY C/D 02/20/2004

MORI HOSSEINI (D) 2359 BEVILLE ROAD DAYTONA BEACH, FL 32119