2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000009693

FILED Apr 26, 2005 Secretary of State

Entity Nar	ne: ATIMA TIT	LE SERVICES, INC.				
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
STE 104	L PALM BEACH					
Current M	ailing Addres	s:	New Maili	New Mailing Address:		
P.O. BOX 210686 ROAYL PALM BEACH, FL 33421			P.O. BOX 6307 LAKE WORTH, FL 33466			
FEI Number:	65-0982398	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired	d()
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
6894 LAKE SUITE 203	ALCHI, RICHAF EWORTH ROA RTH, FL 33467	/D				
The above in the State	named entity s e of Florida.	ubmits this statement for the	purpose of changing i	its registered	office or registered agent,	or both,
SIGNATUR	RE:					
	Electroni	c Signature of Registered Ag	ent	Date		
Election Car	npaign Financing	Trust Fund Contribution ().				
OFFICERS	S AND DIRECT	ORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PSTD () OLLIS, BRUCE I 958 HICKORY T WELLINGTON, I	RAIL	Title: Name: Address: City-St-Zip:	PSTD (X OLLIS, BRUC 2710 HELYN I LAKE WORTH	RD	

City-St-Zip: WELLINGTON, FL 33414 City-St-Zip:

() Delete LUPARDO, MATTHEW F Name: Address: 1331 PERIWINKLE PL

WELLINGTON, FL 33414 City-St-Zip:

Title: () Delete Name: JAMES, DEBBIE Address: 801 SW 8TH AVE

BOYNTON BEACH, FL 33426 City-St-Zip:

LUPARDO, MATTHEW F

(X) Change () Addition

685 ROYAL PALM BEACH BLVD STE 104

WELLINGTON, FL 33414 City-St-Zip:

Title: () Change () Addition

Name: Address: City-St-Zip:

Title:

Name:

Address:

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

SIGNATURE: BRUCE OLLIS Ρ 04/26/2005