

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000074115

FILED
Jul 24, 2007
Secretary of State

Entity Name: SOUTH ATLANTIC TRANSPORTATION CORPORATION

Current Principal Place of Business:

170 SUNPORT LAND, STE. 800
ORLANDO, FL 32809

New Principal Place of Business:

170 SUNPORT LANE, STE. 800
ORLANDO, FL 32809

Current Mailing Address:

170 SUNPORT LAND, STE. 800
ORLANDO, FL 32809

New Mailing Address:

170 SUNPORT LANE, STE. 800
ORLANDO, FL 32809

FEI Number: 65-1041733

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POOLE, WILLIAM F
195 WEKIVA SPRINGS ROAD
204
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

POOLE, WILLIAM F IV
195 WEKIVA SPRINGS ROAD
204
LONGWOOD, FL 32779 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: WILLIAM F. POOLE, IV

07/24/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARRAS, BOB
Address: 170 SUNPORT LAND, STE. 800
City-St-Zip: ORLANDO, FL 32809

Title: V () Delete
Name: ARNOLD, DAN
Address: 3510 CULLEN LAKESHORE DRIVE
City-St-Zip: ORLANDO, FL 32812

Title: V (X) Delete
Name: LONG, SCOTT
Address: 1922 PAMLYNNE PLACE
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ARRAS, BOB
Address: 170 SUNPORT LANE, STE. 800
City-St-Zip: ORLANDO, FL 32809

Title: V (X) Change () Addition
Name: ARNOLD, DANNY
Address: 3513 CULLEN LAKESHORE DRIVE
City-St-Zip: ORLANDO, FL 32812

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: BOB ARRAS

P

07/24/2007

Electronic Signature of Signing Officer or Director

Date