2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 22, 2008 8:00 am Secretary of State

DOCUMENT # P00000100154 1. Entity Name ATLANTIC SHORES MANAGEMENT, INC.						04-22-2008 90024 016 ***150.00				
Principal Place	o of Rucinose	Mailing Address				U 1 U U				
•		<u>-</u>	n.		.					
3511 S. PEN	insula ur. ACH, FL 32127	3511 S. PENINSULA D Daytona Beach, Fl								
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2. Principal P	face of Business - No P.O. Box #	3. Mailing Address								
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Suite, Apt.	#, etc.	Suite, Apt. #, etc.		04112008	Chg-P	CR2E03	34 (12/06)			
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City & State	9	City & State		4, FEI Number	700			olied For		
		7	T		59-3679	128			Applicable	
Zip	Country	Zip	Coun	itry	5. Certificate of	Status Desired		8.75 Addi ee Required		
	6. Name and Address of Current	Pagistared Agent	<u> </u>	T	7 Name and A	ddress of New Re				
	e. Haine and Address of Current	Negistered Agent	****	Name	1. Haine and A	Idoless of New Ite	- gistered A	Serve		
SOLOMON	N, KAREN D									
	ENINSULA DR.			Street Add	ress (P.O. Box Number	is Not Acceptable)			
DAYTONA	BEACH, FL 32127									
	;						•			
	,			City		<u> </u>	FL	Zip Code		
	<u> </u>			L				<u> </u>		
	named entity submits this statement for ions of registered agent.	or the purpose of changing its	s register	ed office or re	egistered agent, or both,	, in the State of Flo	rida. I am la	amiliar with, a	and accept	
	ions of registered agent.									
SIGNATURE_									[
	Signature, typed or printed name of registered agent	and title if applicable. (NO)	TE: Registere	d Agent signature r	required when reinstating)		DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5,00 May Be Trust Fund Contribution. Added to Fees										
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/C	HANGES TO OFFI	CERS AND	DIRECTORS	IN 11	
TITLE	DP	☐ Delete	TITL	e r	<u> </u>			Change	Addition	
NAME	SOLOMON, KAREN D		NAM			k.		<i>-</i> \		
STREET ADDRESS	49 VILLAGE DR.		1979191	, IC	` \		\sim			
CITY - ST-ZIP	TO VILLAGE DIV.			EET ADDRESS	polomon,	Kanen	\mathcal{D}			
	ORMOND BEACH, FL 32174		STR	EET ADDRESS	polomon,	Karen Beach	ارا 10	3a1-	14	
TITLE		☐ Delete	STR	EET ADDRESS	10 11100E	Karen Beach	12 12	3a\- ÆChange	7 4 Addition	
TITLE NAME	ORMOND BEACH, FL 32174	☐ Delete	STRE CITY	EET ADDRESS '-ST-ZIP	Dewong (Karen Beach Mark	, احا ا	3al- AChange	7 4 Addition	
	ORMOND BEACH, FL 32174 DS	☐ Delete	STRE CITY TITU NAM	EET ADDRESS '-ST-ZIP	10 11100E	Kanen Beach Mark Lane	E!	<u>321</u> - R Change	↑ ↓ Addition	
NAME	ORMOND BEACH, FL 32174 DS ROSKAMP, MARK	☐ Delete	STRE CITY TITL NAM STRE	EET ADDRESS Y-ST-ZIP E IE	Dewong (Kanen Beach Mark Lane Beach	FI	321- RChange	Addition	
NAME STREET ADDRESS	ORMOND BEACH, FL 32174 DS ROSKAMP, MARK 131 OAK LANE		STRE CITY TITL NAM STRE	EET ADDRESS (-ST-ZIP E EET ADDRESS) (-ST-ZIP C F EET ADDRESS) (-ST-ZIP	Jenerst Je Poskamp, 131 Oak	Kanen Beach Mark Lane Beach	DFI	32\- ₹Change	Addition Addition	
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changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:	<u> </u>	1		
	SIGNATURE AND T	YPED OR PRINTE	D NAME OF SIGNING	OFFICER OR DIRECTOR