2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# P00000109550

Entity Name: ATLANTIC LOGISTICS, INC.

Current Principal Place of Business:

12058 SAN JOSE BLVD
SUITE 1001
JACKSONVILLE, FL 32223 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 600859
JACKSONVILLE, FL 32260 US

New Mailing Address:

FEI Number: 59-3684851 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOOPER, ROBERT W
12807 BAY PLANTATION DR
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

HOOPER, ROBERT W
12058 SAN JOSE BLVD
SUITE 1001
JACKSONVILLE, FL 32223 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: ROBERT W HOOPER 04/15/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: HOOPER SR, ROBERT W
Address: 12807 BAY PLANTATION DR
City-St-Zip: JACKSONVILLE, FL 32223

Title: P ( ) Delete
Name: HOOPER, EVELYN E
Address: 12807 BAY PLANTATION DR
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP ( ) Delete
Name: MAYLAND, SHELBIE
Address: 101 E BERKSWELL DR
City-St-Zip: JACKSONVILLE, FL 32259

Title: VP ( ) Delete
Name: HOOPER JR, ROBERT W
Address: 676 HAMPTON DOWNS CT
City-St-Zip: JACKSONVILLE, FL 32223

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: VP ( ) Change (X) Addition
Name: GREENE, HOWARD J
Address: 11315 PANTHER CREEK CT
City-St-Zip: JACKSONVILLE, FL 32221

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: ROBERT W HOOPER JR. VP 04/15/2009
Electronic Signature of Signing Officer or Director Date