

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 30, 2002 8:00 am
Secretary of State

05-10-2002 90017 035 ***150.00

DOCUMENT # P01000033575

1. Entity Name

ATLANTIC INVESTMENT TRUST, INC.

Principal Place of Business

1249 NORTH ORANGE AVENUE
 ORLANDO FL 32804

Mailing Address

1249 NORTH ORANGE AVENUE
 ORLANDO FL 32804

90275



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

22-3797344

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

ARMSTRONG, JANICE
 1249 NORTH ORANGE AVENUE
 ORLANDO FL 32804

7. Name and Address of New Registered Agent

Name

MYRNA PASSALACQUA

Street Address (P.O. Box Number is Not Acceptable)

1249 N. ORANGE AVE

City

ORLANDO

FL

Zip Code

32804

8. 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

MYRNA PASSALACQUA

Myrna Passalacqua

DATE

Feb 13/02

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D
 NAME PARRETT, JOHN E
 STREET ADDRESS 1249 NORTH ORANGE AVENUE
 CITY-ST-ZIP ORLANDO FL 32804

☒ Delete
 status
 unchanged

TITLE D
 NAME GERMAINE, JOHN
 STREET ADDRESS 1249 NORTH ORANGE AVENUE
 CITY-ST-ZIP ORLANDO FL 32804

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

D/PIS
 John Germaine

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

V
 Steve Thompson
 1249 N. ORANGE AVE
 ORLANDO, FL 32804

☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: J. P.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 13/02

422-1000

Date

Daytime Phone

2191

CR2004 (9/01)