

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000033575

FILED  
Jan 06, 2005  
Secretary of State

Entity Name: ATLANTIC INVESTMENT TRUST, INC.

## Current Principal Place of Business:

2580 ATLANTIC BLVD  
SUITE 101  
JACKSONVILLE, FL 32207

## New Principal Place of Business:

## Current Mailing Address:

1249 N. ORANGE AVE.  
SUITE 101  
ORLANDO, FL 32804

## New Mailing Address:

1249 N. ORANGE AVE.  
ORLANDO, FL 32804

FEI Number: 22-3797344

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

QUATRALE, MICHELLE  
1249 N ORANGE AVENUE  
ORLANDO, FL 32804 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: PARRETT, JOHN E  
Address: 1249 NORTH ORANGE AVENUE  
City-St-Zip: ORLANDO, FL 32804

Title: DPS ( ) Delete  
Name: GERMAINE, JOHN  
Address: 2580 ATLANTIC BLVD SUITE 101  
City-St-Zip: JACKSONVILLE, FL 32207

Title: V ( ) Delete  
Name: THOMPSON, STEVE  
Address: 1249 N ORANGE AVENUE  
City-St-Zip: ORLANDO, FL 32804

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: V ( ) Change (X) Addition  
Name: WESTON, HOWARD  
Address: 1249 N ORANGE AVE  
City-St-Zip: ORLANDO, FL 32804

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: JOHN PARRETT

D

01/06/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date