


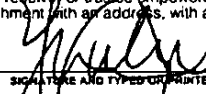
2006 FOR PROFIT CORPORATION ANNUAL REPORT

6/26/2006 90002015-\$150.00-\$150.00

FILED

06 JUL 12 AM 11:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000019784					
1. Entity Name ATL PROPERTY MANAGEMENT, INC.					
Principal Place of Business 5326 BLACK PINE DRIVE TAMPA, FL 33624			Mailing Address 5326 BLACK PINE DRIVE TAMPA, FL 33624		
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 75-3010576	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JANEZIC, JOSEPH 4815 E BUSCH BLVD. SUITE 113 TAMPA, FL 33617			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reissuing) DATE _____					
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2006			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MONTELL, YVONNE 5326 BLACK PINE DRIVE TAMPA, FL 33624	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			Yvonne K. Montell 6/5/06 813-960-1768 813-220-6834		



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 30, 2006

ATL PROPERTY MANAGEMENT, INC.
5326 BLACK PINE DRIVE
TAMPA, FL 33624

SUBJECT: ATL PROPERTY MANAGEMENT, INC.
Ref. Number: P02000019784

We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

There was not a completed annual report/reinstatement application form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

TINA D CARTER
OPS

Letter Number: 006A00037362

P.O. Box 6327 Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 27, 2006

6/26 \$150.00

ATL PROPERTY MANAGEMENT, INC.
5326 BLACK PINE DRIVE
TAMPA, FL 33624

Subject: ATL PROPERTY MANAGEMENT, INC.

Reference Number: P02000019784

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$400.00.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.


/ms

ANNUAL REPORTS SECTION

ATL PROPERTY
MANAGEMENT INC.
5326 BLACK PINE DR.
TAMPA, FL 33624-5705

3-02 #P02000019784

1552

Pay to the Order of Florida Dept of State Date April 24, 2006 63-27831 FL 102
Division of Corporations \$ 150.00
One Hundred, Fifty 00 Dollars 

Bank of America

ACH R/T 063100277

 Annual Report
For 2006 Corporation

⑆063100277⑆ 003674175591⑆ 1552

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