

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000024522

Entity Name: ATM MANAGEMENT INC.

FILED
Oct 05, 2009
Secretary of State

Current Principal Place of Business:

100 S. HALIFAX AVE
DAYTONA BEACH, FL 32118

New Principal Place of Business:

817 DIXON BLVD
SUITE 5A-2301
COCOA, FL 32926

Current Mailing Address:

PO BOX 11041
DAYTONA BEACH, FL 32120

New Mailing Address:

817 DIXON BLVD
SUITE 5A-2301
COCOA, FL 32926

FEI Number: 90-0089742

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MORAIS, ALBERTO T
300 LENOX AVE
DAYTONA BEACH, FLORIDA, FL 32118 US

Name and Address of New Registered Agent:

RICE, RALPH II
817 DIXON BLVD
SUITE 5A-2301
COCOA, FL 32926 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: RALPH RICE II

10/05/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MORAIS, ALBERTO T
Address: 300 LENOX AVE
City-St-Zip: DAYTONA BEACH, FL 32118

Title: ST (X) Delete
Name: MORAIS, FLORENCIA D
Address: 300 LENOX AVE
City-St-Zip: DAYTONA BEACH, FL 32118

Title: V (X) Delete
Name: MORAIS, MIGUEL V
Address: 300 LENOX AVE
City-St-Zip: DAYTONA BEACH, FL 32118

Title: V (X) Delete
Name: MORAIS, NATHAN V
Address: 3414 MORSE AVE
City-St-Zip: SACRAMENTO, CA 95816

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RICE, RALPH II
Address: 29200 CHATEAU COURT
City-St-Zip: FARMINGTON HILLS, MI 48334

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

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

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

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: RALPH RICE II

P

10/05/2009

Electronic Signature of Signing Officer or Director

Date