## 2006 FOR PROFIT CORPORATION

## FILED ANNUAL REPORT Apr 27, 2006 08:00 AN Secretary of State DOCUMENT # P02000108486 ATLANTIC LIST COMPANY, INC. Principal Place of Business Mailing Address 10944 WHITWORTH CT. 10944 WHITWORTH CT. JACKSONVILLE, FL 32225 JACKSONVILLE, FL 32225 CR2E034 (11/05) No Cha-P 04112006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 57-1136745 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent BEINING, TINA DO NOT WRITE 10944 WHITWORTH CT. JACKSONVILLE, FL 32225 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME BEINING, TINA U000000538175 STREET ADDRESS 10944 WHITWORTH CT 05/09/06-80047-011 150.00 JACKSONVILLE, FL 32225 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP