## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000020346

Entity Name: ATLANTIS INSURANCE AGENCY INC.

NEW PORT RICHEY, FL 34654 US

City-St-Zip:

FILED Apr 28, 2009 Secretary of State

Current P	rincipal Place	e of Business:	New Principal Place	of Business:	
	TE ROAD 52 POINT, FL 3	4667 US			
Current M	lailing Addres	ss:	New Mailing Addres	s:	
	TE ROAD 52 POINT, FL 3	4667 US			
FEI Number	: 56-2322497	FEI Number Applied For	( ) FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Age	ent: Name and Address of	Name and Address of New Registered Agent:	
8946 STATE BAYONET The above	s, NICHOLAS F TE ROAD 52 POINT, FL 3 named entity of Florida.	4667 US	or the purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU					
		nic Signature of Register	ed Agent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution (	).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	RUVELAS, NÌC 8811 WHISPEI	) Delete HOLAS P RING OAKS TRAIL CHEY, FL 34654 US	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	RUVELAS, CHI	) Delete RIS RING OAKS TRAIL	Title: Name: Address:	( ) Change ( ) Addition	

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: NICHOLAS P RUVELAS MR 04/28/2009