

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000020010

FILED
Jul 12, 2005
Secretary of State

Entity Name: A.T. HOME CONTRACTORS, INC.

Current Principal Place of Business:

3370 CAPITAL CIRCLE NE
SUITE C3
TALLAHASSEE, FL 32308 US

Current Mailing Address:

3370 CAPITAL CIRCLE NE
SUITE C3
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

3384 CAPITAL CIRCLE NE
SUITE D
TALLAHASSEE, FL 32308 US

New Mailing Address:

3384 CAPITAL CIRCLE NE
SUITE D
TALLAHASSEE, FL 32308 US

FEI Number: 20-0871237

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WURST, PATRICIA
3370 CAPITOL CIRCLE NE
SUITE C3
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

WURST, PATRICIA
3370 CAPITAL CIRCLE NE
SUITE C3
TALLAHASSEE, FL 32308 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:

07/12/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DENNY, ALISON W
Address: 3370 CAPITAL CIRCLE NE, SUITE C3
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: VP () Delete
Name: DENNY, TIMOTHY S
Address: 3370 CAPITAL CIRCLE NE, SUITE C3
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: DIR (X) Delete
Name: WURST, JOHN G
Address: 3370 CAPITAL CIRCLE NE, SUITE C3
City-St-Zip: TALLAHASSEE, FL 32308 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DENNY, ALISON W
Address: 3384 CAPITAL CIRCLE NE, SUITE D
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: VP (X) Change () Addition
Name: DENNY, TIMOTHY S
Address: 3384 CAPITAL CIRCLE NE, SUITE D
City-St-Zip: TALLAHASSEE, FL 32308 US

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

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: ALISON W DENNY

PRES

07/12/2005

Electronic Signature of Signing Officer or Director

Date