

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000092523

Entity Name: A.T.G. WILLIAMS, INC.

FILED  
Oct 25, 2007  
Secretary of State

## Current Principal Place of Business:

9951 ATLANTIC BLVD  
SUITE 260  
JACKSONVILLE, FL 32225

## New Principal Place of Business:

## Current Mailing Address:

9951 ATLANTIC BLVD  
SUITE 260  
JACKSONVILLE, FL 32225

## New Mailing Address:

FEI Number: 20-2521385

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROWN, TED K  
1765 RIVER ROAD  
SUITE 4  
JACKSONVILLE, FL 32207 US

## Name and Address of New Registered Agent:

WILLIAMS, EATHEN A  
3913 YARBOROUGH DR.  
JACKSONVILLE, FL 32277 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: EATHEN WILLIAMS

10/25/2007

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: PD ( ) Delete  
Name: WILLIAMS, EATHEN  
Address: 9951 ATLANTIC BLVD SUITE # 260  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VPD ( ) Delete  
Name: WILLIAMS, SHANNE  
Address: 9951 ATLANTIC BLVD SUITE #260  
City-St-Zip: JACKSONVILLE, FL 32225

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: EATHEN WILLIAMS

PD

10/25/2007

Electronic Signature of Signing Officer or Director

Date