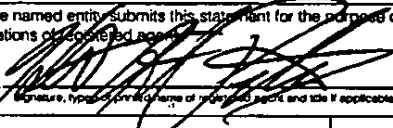
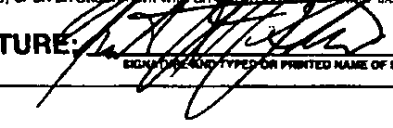


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 27, 2005 8:00 am
Secretary of State

07-07-2005 90009 008 ***158.75
07-27-2005 90044 032 ***391.25

DOCUMENT # P04000165659			
1. Entity Name ATLAS HOVERCRAFT, INC.			
Principal Place of Business 2862 TUBBLEWOOD LANE ORANGE PARK, FL 32065		Mailing Address 2862 TUBBLEWOOD LANE ORANGE PARK, FL 32065	
2. Principal Place of Business 991 BUNKER AVE.		3. Mailing Address 991 BUNKER AVE.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State GREEN COVE SPRINGS FL.		City & State GREEN COVE SPRINGS, FL	
Zip 32043		Zip 32043	
Country CLAY		Country CLAY	
4. FEI Number 20-2329536		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent PETERSON, KURT H 2862 TUBBLEWOOD LANE ORANGE PARK, FL 32065		7. Name and Address of New Registered Agent Name PETERSON, Kurt H. Street Add. 2862 TUBBLEWOOD AVE. City ORANGE PARK FL 32065	
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 the registered agent.			
SIGNATURE 		Kurt H. Peterson P. July 05, 05	
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT Kurt H. Peterson 2862 TUBBLEWOOD AVE. ORANGE PARK, FL 32065 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 affidavit with all powers like empowered.			
SIGNATURE: 		Kurt H. Peterson July 05, 05 904-637-9525	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

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