

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000146239

Entity Name: ATRIUM OF SW FLORIDA, INC.

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2771 TEAL CT  
ST JAMES CITY, FL 33966

**New Principal Place of Business:**

**Current Mailing Address:**

2771 TEAL CT  
ST JAMES CITY, FL 33966

**New Mailing Address:**

FEI Number: 94-2309696

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PEEL, KELLY C  
2323 TARPON RD  
NAPLES, FL 34102 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: LIDDELL, NORMAN  
Address: 2771 TEAL CT  
City-St-Zip: ST JAMES CITY, FL 33966

Title: TD  
Name: PEEL, KELLY C  
Address: 2323 TARPON RD  
City-St-Zip: NAPLES, FL 34102

I hereby 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 all other like empowered.

SIGNATURE: RYAN W. LEFFLER

MGR

02/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date