

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000060762

FILED
Apr 09, 2009
Secretary of State

Entity Name: ATLANTIC ART AND FRAMING, INC.

Current Principal Place of Business:

634 TALL OAKS TER.
LONGWOOD, FL 32750 US

New Principal Place of Business:

2520 N. RONALD REAGAN BLVD.
SUITE 124
LONGWOOD, FL 32750 US

Current Mailing Address:

634 TALL OAKS TER.
LONGWOOD, FL 32750 US

New Mailing Address:

PO BOX 951410
LAKE MARY, FL 32795

FEI Number: 26-2860786

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITAKER, SUSIE A
634 TALL OAKS TER.
LONGWOOD, FL 32750 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WHITAKER, SUSIE A
Address: 634 TALL OAKS TER.
City-St-Zip: LONGWOOD, FL 32750

Title: VP () Delete
Name: HERRING, STEPHEN J
Address: 634 TALL OAKS TER.
City-St-Zip: LONGWOOD, FL 32750

Title: D () Delete
Name: WHITAKER, SUSIE A
Address: 634 TALL OAKS TER.
City-St-Zip: LONGWOOD, FL 32750

Title: T () Delete
Name: WHITAKER, SUSIE A
Address: 634 TALL OAKS TER.
City-St-Zip: LONGWOOD, FL 32750

Title: S () Delete
Name: WHITAKER, SUSIE A
Address: 634 TALL OAKS TER.
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: WHITAKER, SUSIE A
Address: 634 TALL OAKS TER.
City-St-Zip: LONGWOOD, FL 32750

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

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: SUSIE WHITAKER

P

04/09/2009

Electronic Signature of Signing Officer or Director

_____ Date