## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000079270

Entity Name: ATLC. INC.

FILED Jan 14, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
100 RIALTO PLACE, SUITE 950 MELBOURNE, FL 32901			100 RIALTO PLACE SUITE 950 MELBOURNE, FL 329	901 US	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
100 RIALTO PLACE, SUITE 950 MELBOURNE, FL 32901			100 RIALTO PLACE SUITE 950 MELBOURNE, FL 329	901 US	
FEI Number	: 26-3480153	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
WILLIS, DAVID C 300 S. ORANGE AVE, SUITE 1400 ORLANDO, FL 32801 US			ANDRE, EDWARD A 100 RIALTO PLACE SUITE 950 MELBOURNE, FL 329	100 RIALTO PLACE	
	e named entity e of Florida.	submits this statement for the p	urpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: EDWARD A. ANDRE				01/14/2009	
	Electron	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ANDRE, EDWA	ACE, SUITE 950	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DEFFEBACH, I	ACE, SUITE 950	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D ( TRONER, WILI	) Delete LIAM A	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: EDWARD A. ANDRE D 01/14/2009

100 RIALTO PLACE, SUITE 950

MELBOURNE, FL 32901

Address:

City-St-Zip: