

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 25, 2007 8:00 am
Secretary of State

05-25-2007 90033 001 ***300.00

DOCUMENT # P31188 1. Entity Name ATLANTA BELTING COMPANY					
Principal Place of Business C/O ERNEST D. KEY, JR. 560 EDGEWOOD AVE., NORTHEAST ATLANTA, GA 30312				Mailing Address C/O ERNEST D. KEY, JR. 560 EDGEWOOD AVE., NORTHEAST ATLANTA, GA 30312	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip _____ Country _____		Zip _____ Country _____			
4. FEI Number 58-0145290				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DAVIS, STEVEN W 11398 SPACE BLVD. ORLANDO, FL 32837			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
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 registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	C KEY, ERNEST D., JR. <input type="checkbox"/> Delete 560 EDGEWOOD AVE., N.E. ATLANTA, GA		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KEY, TERESA M <input type="checkbox"/> Delete 560 EDGEWOOD AVENUE, NE ATLANTA, GA		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition KEY, TERESA M 560 EDGEWOOD AVENUE, NE ATLANTA, GA 30312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KEY, TERESA M <input checked="" type="checkbox"/> Delete 560 EDGEWOOD AVE., N.E. ATLANTA, GA		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition MARTIN, STEVE 560 EDGEWOOD AVENUE, N.E. ATLANTA, GA 30312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEARD, JAMES L. <input type="checkbox"/> Delete 560 EDGEWOOD AVE., N.E. ATLANTA, GA		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BREEN, WILLIAM H., HR. <input type="checkbox"/> Delete 108 E. PONCE DE LEON AVE DECATUR, GA		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAIER, FRANK, JR. <input type="checkbox"/> Delete 3225 PEACHTREE ROAD ATLANTA, GA		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 address, with all other like empowered.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date: 22 May 07 Daytime Phone: 404 688 0985					

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