

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P40203

Entity Name: ATG I, INC.

FILED
Aug 19, 2005
Secretary of State

Current Principal Place of Business:

7277 164TH AVE NE
REDMOND, WA 98052 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 97061
REDMOND, WA 980731961 US

New Mailing Address:

FEI Number: 91-1499089

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 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: KEITH, MICHAEL G
Address: 7277 164TH AVE NE
City-St-Zip: REDMOND, WA 98052

Title: EVPD () Delete
Name: LANDIS, GREGORY P
Address: 7277 164TH AVE NE
City-St-Zip: REDMOND, WA 98052

Title: AS () Delete
Name: BRODD, MARY
Address: 7277 164TH AVE NE
City-St-Zip: REDMOND, WA 98052

Title: SEC () Delete
Name: WASSER, MARILYN
Address: 150 MT. AIRY ROAD
City-St-Zip: BASKING RIDGE, NJ 07920

Title: TREA () Delete
Name: HARRIS, ERROL A
Address: 7277 164TH AVE NE
City-St-Zip: REDMOND, WA 98052

Title: VPD (X) Delete
Name: MCLAUGHLIN, TIMOTHY
Address: 7277 164TH AVE NE
City-St-Zip: REDMOND, WA 98052

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SIGMAN, STANLEY
Address: 5565 GLENRIDGE CONNECTOR
City-St-Zip: ATLANTA, GA 30342

Title: SEC (X) Change () Addition
Name: TACKER, CAROL
Address: 5565 GLENRIDGE CONNECTOR
City-St-Zip: ATLANTA, GA 30342

Title: AS (X) Change () Addition
Name: SUZANNE, LIFFRING
Address: 7277 164TH AVE NE
City-St-Zip: REDMOND, WA 98052

Title: COO (X) Change () Addition
Name: DE LA VEGA, RALPH
Address: 5565 GLENRIDGE CONNECTOR
City-St-Zip: ATLANTA, GA 30342

Title: TREA (X) Change () Addition
Name: FOLEY, SEAN
Address: 5565 GLENRIDGE CONNECTOR
City-St-Zip: ATLANTA, GA 30342

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SUZANNE LIFFRING

AS

08/19/2005

Electronic Signature of Signing Officer or Director

Date