

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED  
AND  
FILED**

CORPORATION  
ANNUAL REPORT  
**1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mathum  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P94000039407 (9)**  
1. Corporation Name  
**ATLANTIC LOGIC, INC.**

95 APR 27 AM 10: 16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
**260 ROBERT WAY SOUTH  
SATELLITE BEACH FL 32937**      **260 ROBERT WAY SOUTH  
SATELLITE BEACH FL 32937**

DO NOT WRITE IN THIS SPACE

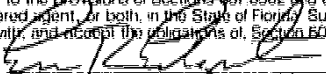
3. Date Incorporated or Qualified **05/20/1994**      3a. Date of Last Report  
4. FEI Number **59-3249037**      Applied For  
Not Applicable  
5. Certificate of Status Desired  **\$8.75** Additional  
Fee Required  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be  
Added to Fees  
7. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes  Yes  No

2. Principal Place of Business      2a. Mailing Address  
21 **3074 Rio Baya N.**      26 **3074 Rio Baya N.**  
Suite, Apt. #, etc      Suite, Apt. #, etc  
22      27  
City & State      City & State  
23 **Indialantic FL**      28 **Indialantic FL**  
Zip      Country      Zip      Country  
24 **32903**      25 **U.S.**      29 **32903**      30 **U.S.**

9. Name and Address of Current Registered Agent  
**JOHNSON, DARRYL G  
260 ROBERT WAY SOUTH  
SATELLITE BEACH FL 32937**

10. Name and Address of New Registered Agent  
81 Name **Eric R. Edgerton**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**3074 Rio Baya N.**  
83  
84 City **Indialantic** FL      85 Zip Code **32903**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE  **ERIC R. EDGERTON**      2/25/95  
(Signature must be printed name of registered agent and this is applicable)      (NOTE: Registered Agent signature required when registering)

| 12. OFFICERS AND DIRECTORS |                 |
|----------------------------|-----------------|
| TITLE                      | NAME            |
| STREET ADDRESS             | CITY - ST - ZIP |
| TITLE                      | NAME            |
| STREET ADDRESS             | CITY - ST - ZIP |
| TITLE                      | NAME            |
| STREET ADDRESS             | CITY - ST - ZIP |
| TITLE                      | NAME            |
| STREET ADDRESS             | CITY - ST - ZIP |
| TITLE                      | NAME            |
| STREET ADDRESS             | CITY - ST - ZIP |
| TITLE                      | NAME            |
| STREET ADDRESS             | CITY - ST - ZIP |

| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                 |
|---|-----------------|
| TITLE   | NAME            |
| STREET ADDRESS  | CITY - ST - ZIP |
| TITLE   | NAME            |
| STREET ADDRESS  | CITY - ST - ZIP |
| TITLE   | NAME            |
| STREET ADDRESS  | CITY - ST - ZIP |
| TITLE   | NAME            |
| STREET ADDRESS  | CITY - ST - ZIP |
| TITLE   | NAME            |
| STREET ADDRESS  | CITY - ST - ZIP |
| TITLE   | NAME            |
| STREET ADDRESS  | CITY - ST - ZIP |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 the report as required by Chapter 007, Florida Statutes, and that my name appears in Block 12 or Block 13. If checked, a separate attachment with an address.

SIGNATURE:  **Darryl G. Johnson**      2/25/95 (407) 779-0351  
(Signature and typed or printed name of signing officer or director)      (Date)      (Telephone Number)