**FILED** 

941-722-3291

## 2002 Uniform Business Report (UBR)

changed, or on an attachment

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAL

SIGNATURE:

## Mar 18, 2002 8:00 am Secretary of State P94000093293 DOCUMENT # 1. Entity Name 03-18-2002 90045 002 \*\*\*158 ATG HOLDING COMPANY Principal Place of Business Mailing Address 503 - 10TH STREET WEST 503 - 10TH STREET WEST PALMETTO FL 34221 PALMETTO FL 34221 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3303760 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 😞 Name SALTSMAN, ROBERT P Street Address (P.O. Box Number is Not Acceptable) 200 EAST NEW ENGLAND AVE. SUITE 301 WINTER PARK FL 32789 Zip Code FI 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. (9/01) ☐ Change ☐ Addition TITLE ☐ Delete TITLE ESFORMES, JOSEPH NAME CR2E034 **503 10TH STREET WEST** STREET ADDRESS STREET ADDRESS PALMETTO FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition **ESFORMES, NATHAN** NAME NAME STREET ADDRESS 503 10TH STREET WEST STREET ADDRESS PALMETTO FL 34221 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition HELLER, HARVEY NAME NAME 288 SOUTH 4TH STREET STREET ADDRESS STREET ADDRESS WINTER GARDEN FL 34787 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete CARRAWAY, MAC NAME 503 - 10TH ST. WEST STREET ADDRESS STREET ADDRESS PALMETTO FL 34221 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition FALK, HARRY NAME NAME 288 SOUTH 9TH STREET STREET ADDRESS STREET ADDRESS WINTER GARDEN FL 34787 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if chapter does not accommod to the control of the corporation of the co