FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT **CORPORATION** ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000002830 (4) ATLANTIC LAND HOLDING, INC.

Principal Place of Business			Mailing Address					- { LEGITORY IN THE PRINT BANK BANK BANK BANK BOTT BETT BETT BETT PROBET LAND ATTIC BRIT ARM A		
1364 COTTONWOOD CIRCLE 1364 COTTONWOOD CIR FORT LAUDERDALE FL 33326 FORT LAUDERDALE FL 3										
								3. Date Incorporated or Qualified 01/11/1995 3a. Date of Last Report 05/01/1996		
}			Mailing Address					4. FEI Number Applied For		
Sulte, Apt.	# etc	26	Suite, Apt. #, etc.					65-0580012 Not Applicable 5 Codificate of Status Deplication 17 \$8.75 Additional		
22		27	27					5. Certificate of Status Desired Fee Required		
City & Stat	!e	28	City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country			Zip Cou					This corporation has liability for intangible tax under s. 199.032,		
25 29			30					Florida Statutes 💢 Yes 🗌 No		
9. Name and Address of Current Registered Agent CORPORATION INCORNATION SERVICES INC. 81						T - NI	ame	10. Name and Address of New Registered Agent		
CORPORATION INFORMATION SERVICES INC. 1201 HAYS ST.					82					
	LAHASSEE FL 32301					S	reel Addre	ess (P.O. Box Number is Not Acceptable)		
					83	-				
					84	Ċ	ty	FL 85 Zip Code		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above name office or registered agent, or both, in the State of Florida, Such change was authorized by the						med corpo				
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	Signature, typed or printed name of registered	agent and title	itappicable (NC	DTE: Regise	ried Age	ent sig	mature required	d when reinstating) DATE		
12.	OFFICERS A	ND DIREC		13	3.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D CLASSIAN LEE D		DELETE		1/11/6			☐ Change ☐ Addition		
NAME	GLASSMAN, LEE D 1364 COTTONWOOD CIR.				NAME					
STREET ADDRESS CITY-ST-ZIP	FORT LAUDERDALE FL 3332	26			I STREET CITY - S					
TITLE					THILE	21.511		Change Addition		
NAME				2.2 NAME			-			
STREET ADDRESS				2.3 STREET ADDR			RESS			
CITY-ST-ZIP					2. 4 C(1) Y - \$1 - Z(P					
TITLE			☐ DELETE	1	TITLE		}	☐ Change ☐ Addition		
NAME					NAME	155				
STREET ADDRESS CITY-ST-ZIP					STREET		1			
TITLE					3.4. CITY-ST-ZIP 4.1 TITLE		<u> </u>	Change Addition		
NAME			_		NAME		Ì	 		
STREET ADDRESS				4.3	STREET	ADDE	RESS			
CITY-ST-ZIP				44	CITY-S	T - ZIF				
TITLE			☐ DELETE	51	TITLE			Change Addition		
NAME				5.2	NAME					
STREET ADDRESS					STREET					
CITY-ST-ZIP					5.4 CITY-ST-7/P 6.1 TITLE		<u> </u>	Change Addition		
TITLE NAME			L DUCTIE	1	NAME		}	C Change C Addition		
STREET ADDRESS					STREET	ADDE	IESS			
City-ST-ZIP				1	CITY-S		ì			
14. I do heret	by certify that the information suppl	ied with thi	s filing does not qua	lify for th	o exe	mpt	on stated i	in Section 119.07(3)(i), Florida Statutes. I further certify that the		
l am an of	in indicated on this annual report of fficer or director of the corporation in Block 12 or Block 13 if changed,	or the rece	eiver or trustee empo	wered to	accu exec	urate oute	and that mathis report	my signature shall have the same legal effect as if made under oath; that as required by Chapter 607, Florida Statutes; and that my name		

SIGNATURE:

4-1-17

513-0501

FILED

Apr 21 1997 8:00am

Secretary of State