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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000070067 (0)

ATLANTIC DATALOG, INC.

FI	ncipa	ii Mace	OI	Busines
~	DAV	00015		

Mailing Address

83 BAY DRIVE

83 BAY DRIVE

FILED May 12 1997 8:00am Secretary of State



KEY WEST FL	33010	KEY WEST FL 33040-8114			
				3. Date Incorporated or Qualified 09/08/1995	3a. Date of Last Report 09/03/1996
2. Principal P	lace of Business	2a. Mailing Address	0.11	4. FEI Number	Applied For
1333;	3 DUCK AVE.	26 3333 DUC	KAUE.	65-0602762	Not Applicable
Suite Apl	1-108	Suite Apt. A etc.	8	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	111XSt. FL	City & State	HFL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
4 330	SHO 25 U.S.A	29 33040	Country S A	8. This corporation has liability for i	ntangible tax under s. 199.032, Yes No
	9. Name and Address of Curri		W 14 12 1 E	10. Name and Address of New Re	
VICI	KERY, SHELLEY B		81 Name	ANDUN Chionen	
	BAY DRIVE		82 Street A	MAKIN D. CLARKE	(-)
	WEST FL 33040		333	3 DUCKALLE #A-JO	8
			83		
			84 Civ	Must	FL B5 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	, the above-named	corporation submits this statement for the p oration's board of directors. I hereby accep	urpose of changing Its registered
office or r agent. La	egistered agent, or both, in the Sta im familiar with, and accept the Abl	te of Florida. Such change was aut cations of Section 607,0505, Florid	thorized by the corp da Statutes. 🛙 🛊	oration's board of directors. I hereby accep	it the appointment as registered
SIGNATURE	JUNE URALL	MAKED PRAS	TIME	HPR1	1 22,1997
SIGNATION	Signal are 1, collor of nied name of logistoled	grof and the proposed (NOTE:	Registered Agent signature (required when reinstating)	DATÉ
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
THTLE	l P	☐ DELETE	1.1 TOTLE	VP	Change Addition
NAME	VICKERY, SHELLEY B		1.2 NAME	VILKERY, SHELLY, B	4
STREET ADDRESS	93 BAY DRIVE		1.3 STREET ADDRESS	40 cruickshauk la	ki <u>k</u>
CHTY - ST - ZIP	KEY WEST FL 33040		1.4 CITY-ST-ZIP	CUDJOEKEY, FL 330	ગ્યુટ
TITLE	VP	☐ DELETE	2.1 TITLE	PISECITREAS.	Change Addition
NAME	CLARKE, MARIA D		22 NAME	CLARKE, MARIA D	•
STREET ADDRESS	93 BAY DRIVE		23 STREET ADDRESS	XXXX DUCK AUL #A	~ 208
CHY-ST-Z-P	KEY WEST FL 33040		2 4 CITY-ST-ZIP	PATITION STATE STA	M LOUID
TITLE .	NET WEST IE GOSTS	DELETE	3.1 TITLE	hed recent i was no	Change Addition
NAME			3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS		
CITY - ST- ZIP			3.4, CITY - ST - ZIP		
Tiful		DELETE	4.1 TITLE		Change Addition
			4.2 NAME		
NAME			4.3 STREET ADDRESS	•	
STREET ADDRESS					
C-Tr - ST - 7/P		☐ DELETÉ	4.4 CITY - ST - ZIP 5.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
711(6	1		1		E GLEGING E NUMBERON
NAME:			52 NAME		
STREET ADORESS			5.3 STREET AODRESS		
CITY - S1 - 7#		1 22.22	5.4 CHY-ST-ZIP		T Asset T Leave
TOLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME	•.	
STREET ADDRESS			6.3 STREET ADDRESS	•	
CI*Y - \$1 - 21 ²			6.4 CITY-ST-ZIP	v	
	by cortile that the information cump	ad with this files does not qualify.		ated in Section 119 07(3)(i) Florida Statute	s. I further certify that the

I do hereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(1), Florida Statutes. Flurtine 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 this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Flock 13 if changed, or an antachment with an address.