2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 27, 2001 8:00 am Secretary of State **DOCUMENT # P95000079468** AMERICAN ATLAS CORP. 02-27-2001 90351 021 ***150.00 Principal Place of Business Mailing Address 2309 PARK PLACE 2309 PARK PLACE PONTE VEDRA BEACH FL 32082 PONTE VEDRA BEACH FL 32082 **60043130** 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 65-0625074 Applied For Not Applicable Country Zip 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 BORNMILLER, W. R Street Address (P.O. Box Number is Not Acceptable) 2309 PARK PLACE PONTE VEDRA BEACH FL 32082 Zip Code City FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. П Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Addition ☐ Delete TITLE Change BORNMILLER, W. R NAME NAME 2309 PARK PLACE STREET ADDRESS STREET ADDRESS PONTE VEDRA BEACH FL 32082 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition BORNMILLER, JOANNA NAME NAME 2309 PARK PLACE STREET ADDRESS STREET ADDRESS PONTE VEDRA BEACH FL 32082 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition BORNMILLER, MICHELLE NAME 2309 PARK PLACE STREET ADDRESS STREET ADDRESS PONTE VEDRA BEACH FL 32082 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition **BORNMILLER, WILLIAM** NAME NAME 2309 PARK PLACE STREET ADDRESS STREET ADDRESS PONTE VEDRA BEACH FL 32082 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS 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 is changed, or on an attachment with an address, with all other like empowered.

Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if