

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000060528

Entity Name: ATBAR PROPERTIES, INC.

FILED
Feb 05, 2008
Secretary of State

Current Principal Place of Business:

P.O. BOX 38355
TALLAHASSEE, FL 323158355

New Principal Place of Business:

2800 MAHAN DRIVE
TALLAHASSEE, FL 32308

Current Mailing Address:

P.O. BOX 38355
TALLAHASSEE, FL 323158355

New Mailing Address:

P.O. BOX 38355
TALLAHASSEE, FL 32315

FEI Number: 59-3364670

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDBERG, STUART E
2039 CENTRE POINTE BLVD SUITE 201
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

GOWLAND JR, CHARLES L ESQ
3020 N SHANNON LAKES DR
TALLAHASSEE, FL 32309 US

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: CHARLES L. GOWLAND JR., ESQ

02/05/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ATKINS, CHARLES N
Address: P.O. BOX 12248
City-St-Zip: TALLAHASSEE, FL 32317

Title: D (X) Delete
Name: BARBER, ROBIN C
Address: 4325 OAKMONT DR.
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BARBER, ROBIN C
Address: 4325 OAKMONT DR.
City-St-Zip: TALLAHASSEE, FL 32303

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBIN C. BARBER

D

02/05/2008

Electronic Signature of Signing Officer or Director

Date