

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000011648

FILED  
Apr 25, 2002 8:00 AM  
Secretary of State

Entity Name: ATM CONCEPTS, INC.

## Current Principal Place of Business:

3000 GULF TO BAY BLVD 2 FL  
CLRWATER, FL 33759

## New Principal Place of Business:

300 SOUTH DUNCAN AVE.  
SUITE 218  
CLEARWATER, FL 33755

## Current Mailing Address:

PO BOX 4126  
CLEARWATER, FL 33758

## New Mailing Address:

FEI Number: 59-3492600

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

EVANS, AMY LEIGH  
3700 PREAKNESS PL 1604  
PALM HARBOR, FL 34684

## Name and Address of New Registered Agent:

EVANS, AMY  
300 SOUTH DUNCAN AVE.  
SUITE 218  
CLEARWATER, FL 33755

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: AMY EVANS

04/25/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTSM ( ) Delete  
Name: EVANS, AMY LEIGH  
Address: 3700 PREAKNESS PL #1604  
City-St-Zip: PALM HARBOR, FL 34684

Title: VD (X) Delete  
Name: CRANE, CLARA  
Address: 3120 BLUFF BLVD  
City-St-Zip: HOLIDAY, FL 34691

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSM (X) Change ( ) Addition  
Name: EVANS, AMY  
Address: 300 SOUTH DUNCAN AVE. SUITE 218  
City-St-Zip: CLEARWATER, FL 33755

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: AMY EVANS

PTSM

04/25/2002

Electronic Signature of Signing Officer or Director

Date