

**PROFIT
CORPORATION
ANNUAL REPORT
1999**


FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000065422

1. Corporation Name

ATM TRUST, INCORPORATED

Principal Place of Business

321 OLEANDER WAY
CASSELBERRY FL 32707

Mailing Address

321 OLEANDER WAY
CASSELBERRY FL 32707

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/27/1998

4. FEI Number

59-3526812

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

CORRENTE, CARMEN F
444 SEABREEZE BLVD.
5TH FLOOR
DAYTONA BEACH FL 32118

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

D
COREENTE, CARMEN-F
444 SEABREEZE BLVD. 5TH FLOOR
DAYTONA BEACH FL 32118

2.1 TITLE ☐ DELETE

VP
Alan Knight
321 Oleander Way
Casselberry, Fla.

3.1 TITLE ☐ DELETE

S/T
Betty Bradshaw
321 Oleander Way
Casselberry, Fla.

4.1 TITLE ☐ DELETE

VP
Alan Knight
321 Oleander Way
Casselberry, Fla.

5.1 TITLE ☐ DELETE

S/T
Betty Bradshaw
321 Oleander Way
Casselberry, Fla.

6.1 TITLE ☐ DELETE

VP
Alan Knight
321 Oleander Way
Casselberry, Fla.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

P
Jonathan Kenney
321 Oleander Way Casselberry, Fla.

2.1 TITLE ☐ Change ☒ Addition

VP
Alan Knight
321 Oleander Way
Casselberry, Fla.

3.1 TITLE ☐ Change ☒ Addition

S/T
Betty Bradshaw
321 Oleander Way
Casselberry, Fla.

4.1 TITLE ☐ Change ☐ Addition

VP
Alan Knight
321 Oleander Way
Casselberry, Fla.

5.1 TITLE ☐ Change ☐ Addition

S/T
Betty Bradshaw
321 Oleander Way
Casselberry, Fla.

6.1 TITLE ☐ Change ☐ Addition

VP
Alan Knight
321 Oleander Way
Casselberry, Fla.

14. 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 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 Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)