

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000090632

Entity Name: ATLANTIC BANCGROUP, INC.

FILED  
Apr 25, 2008  
Secretary of State

## Current Principal Place of Business:

1315 SOUTH THIRD STREET  
JACKSONVILLE BEACH, FL 32250

## New Principal Place of Business:

## Current Mailing Address:

1315 SOUTH THIRD STREET  
JACKSONVILLE BEACH, FL 32250

## New Mailing Address:

FEI Number: 59-3543956

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

IGLER & DOUGHERTY, P.A.  
2457 CARE DRIVE  
TALLAHASSEE, FL 32308 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CERVONE, FRANK J  
Address: 474 JACKSONVILLE DRIVE  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D ( ) Delete  
Name: CHANDLER, BARRY W  
Address: 1022 SEAWOOD DR.  
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: D ( ) Delete  
Name: DUBBERLY, JIMMY D  
Address: 108 GREENWOOD DR.  
City-St-Zip: GLENVILLE, GA 30427

Title: D ( ) Delete  
Name: GLISSON, DONALD F JR  
Address: 4451 CATHEYS CLUB LANE  
City-St-Zip: JACKSONVILLE, FL 32224

Title: ST ( ) Delete  
Name: YOUNG, DAVID L  
Address: 1365 PINWOOD RD  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D ( ) Delete  
Name: SCHEIDERMAN, ROBIN  
Address: 3419 LANDS END DR.  
City-St-Zip: ST. AUGUSTINE, FL 32095

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition  
Name: WOLFSON, DENNIS M  
Address: 9548 WATERFORD ROAD  
City-St-Zip: JACKSONVILLE, FL 32257

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

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

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: DAVID L. YOUNG

ST

04/25/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date