

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000090632

Entity Name: ATLANTIC BANCGROUP, INC.

FILED
Apr 28, 2009
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: WOLFSON, DENNIS M
Address: 9548 WATERFORD ROAD
City-St-Zip: JACKSONVILLE, FL 32257

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

Title: () Change () Addition
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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

04/28/2009

Electronic Signature of Signing Officer or Director

_____ Date