2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000068329

Entity Name: ATLANTIC OFFICE PROPERTIES INC.

FILED Mar 13, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4804 ORCHARD LANE 587 CARDINAL AVENUE DELRAY BEACH, FL 33445 BOCA RATON, FL 33486

Current Mailing Address: New Mailing Address:

4804 ORCHARD LANE
DELRAY BEACH, FL 33445

587 CARDINAL AVENUE
BOCA RATON, FL 33486

FEI Number: 65-0942671 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BROWNE, DAVID M
4804 ORCHARD LANE
DELRAY BEACH, FL 33445 US
BROWNE, DAVID M
587 CARDINAL AVENUE
BOCA RATON, FL 33486 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: DAVID M. BROWNE 03/13/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change (

 Name:
 BROWNE, DAVID M
 Name:
 BROWNE, DAVID M

 Address:
 4804 ORCHARD LANE
 Address:
 587 CARDINAL AVENUE

 City-St-Zip:
 DELRAY BEACH, FL 33445
 City-St-Zip:
 BOCA RATON, FL 33486

Title: VTD () Delete Title: VTD (X) Change () Addition

 Name:
 BROWNE, KIMBERLY J
 Name:
 BROWNE, KIMBERLY J

 Address:
 4804 ORCHARD LANE
 Address:
 587 CARDINAL AVENUE

 City-St-Zip:
 DELRAY BEACH, FL 33445
 City-St-Zip:
 BOCA RATON, FL 33486

I hereby certify that the information supplied with this filing does not qualify for the 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 M. BROWNE PRES 03/13/2007