

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 16, 2008 8:00 am
Secretary of State

05-16-2008 90017 016 ***150.00

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1. Entity Name
CENTENNIAL ATLANTA, INC.



Principal Place of Business
**3700 AIRPORT RD.
SUITE 401
BOCA RATON, FL 33431**

Mailing Address
**2101 W COMMERCIAL BLVD STE 2800
FORT LAUDERDALE, FL 33309**

DO NOT WRITE IN THIS SPACE



01042008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0960427

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**FORMAN, ROBERT S ESQ.
2101 WEST COMMERCIAL BOULEVARD
SUITE 2800
FT LAUDERDALE, FL 33309**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P**
NAME **SHIMM, KENNETH L**
STREET ADDRESS **2101 W COMMERCIAL BLVD, SUITE 2800**
CITY - ST - ZIP **FORT LAUDERDALE, FL 33309**

TITLE **D**
NAME **SHIMM, STACEY**
STREET ADDRESS **2101 W COMMERCIAL BLVD, SUITE 2800**
CITY - ST - ZIP **FORT LAUDERDALE, FL 33309**

TITLE **P**
NAME **SHIMM, KENNETH L**
STREET ADDRESS **2101 W. COMMERCIAL BLVD #4100**
CITY - ST - ZIP **FORT LAUDERDALE, FL 33309**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 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

Kenneth L. Shimm, President

4/1/08
Date

561-391-1751
Daytime Phone #