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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # Corporation Name

(7)

ATLANTIC INSTITUTE REVIEW BOARD, INC.

Principal Place of Business

Mailing Address

FILED Apr 24 1998 8:00am Secretary of State



350 N CLYDE MORRIS BLVD 350 N CLYDE MORRIS BLVD DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32114 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/09/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3105258 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible Yes Yes 24 25 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SIMPSON, EDWARD F., JR. 350 N. CLYDE MORRIS BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) DAYTONA BEACH FL 32114 83 City 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 (NOTL: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ☐ DELETE Addition TITLE 1.1 TITLE ☐ Change **SCHANDEL, DAVID C** NAME 1.2 NAME **35**0 NORTH CLYDE MORRIS BLVD. STREET ADDRESS 1.3 STREET ADDRESS DAYTONA BEACH FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change TITLE 2.1 TITLE Addition | SIMPSON, EDWARD F JR. 2.2 NAME 350 N. CLYDE MORRIS BLVD. STREET ADDRESS 2.3 STREET ADDRESS DAYTONA BEACH FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition CARLTON, ALICE M. NAME 3.2 NAME 350 N CLYDE MORRIS BLVD STREET ADDRESS 3.3 STREET ADDRESS DAYTONA BCH FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition WILLIAMS, M. D. DAVID L. NAME 4. 2 NAME **350 NORTH CLYDE MORRIS BLVD.** STREET ADDRESS 4.3 STREET ADDRESS DAYTONA BCH FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City-St-ZIP DELETE TITLE Change ☐ Addition 6.1 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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 changed, or on an attachment with an address Block 12 or Block 13 if