

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L62284

**Entity Name:** ATLANTIC MORTGAGE SERVICES, INC.

**Current Principal Place of Business:**

1790 HWY A-1-A  
STE 101  
SATELLITE BEACH, FL 32937

**Current Mailing Address:**

1790 HWY A-1-A  
STE 101  
SATELLITE BCH, FL 32937 US

**FEI Number:** 59-3000922

**Certificate of Status Desired:** No

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

OVERSTREET, DANIEL E  
513 TURTLE CIRCLE  
SATELLITE BEACH, FL 32937 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRES  
Name            OVERSTREET, DANIEL E.  
Address        513 TURTLE CR  
City-State-Zip: SATELLITE BEACH FL 32937

Title            VP  
Name            OVERSTREET, DEBRA  
Address        513 TURTLE CR  
City-State-Zip: SATELLITE BEACH FL 32937

I hereby 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 all other like empowered.

**SIGNATURE:** DANIEL E. OVERSTREET

**PRESIDENT**

**01/18/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date