

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000051298

**Entity Name:** ATLASMERCANTILE, INC.

**Current Principal Place of Business:**

301 S. MISSOURI AVE 2ND FLOOR  
CLEARWATER, FL 33756

**Current Mailing Address:**

301 S. MISSOURI AVE 2ND FLOOR  
CLEARWATER, FL 33756

**FEI Number: 59-3591558**

**Certificate of Status Desired: No**

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

SCHAIBLE, JOHN M  
301 S. MISSOURI AVE 2ND FLOOR  
CLEARWATER, FL 33756 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 D  
Name SCHAIBLE, JOHN M  
Address 301 S MISOUR AVE  
City-State-Zip: CLEARWATER FL 33756

Title D  
Name CAAMANO, DANIEL  
Address 301 S MISOUR AVE  
City-State-Zip: CLEARWATER FL 33756

Title CFO  
Name HILL, SHARON  
Address 301 S. MISSOURI AVE 2ND FLOOR  
City-State-Zip: CLEARWATER FL 33756

*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: SHARON HILL**

**CFO**

**04/20/2016**

Electronic Signature of Signing Officer/Director Detail

Date