

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000107854

**FILED**  
**Jan 22, 2008**  
**Secretary of State**

**Entity Name:** ATLANTIC TREASURE COAST INSURANCE, INC.

**Current Principal Place of Business:**

584 NW UNIVERSITY BLVD  
SUITE 705  
PORT ST LUCIE, FL 34986

**New Principal Place of Business:**

529 NW PRIMA VISTA BLVD,  
SUITE L  
PORT ST LUCIE, FL 34983

**Current Mailing Address:**

584 NW UNIVERSITY BLVD  
SUITE 705  
PORT ST LUCIE, FL 34986

**New Mailing Address:**

529 NW PRIMA VISTA BLVD,  
SUITE L  
PORT ST LUCIE, FL 34983

**FEI Number:** 26-1363059

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EPPER, THOMAS G  
154 SW PEACOCK BLVD  
UNIT 104  
PORT ST LUCIE, FL 34986 US

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: EPPER, THOMAS G  
Address: 154 SW PEACOCK BLVD, UNIT 105  
City-St-Zip: PORT ST LUCIE, FL 34986

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: THOMAS EPPER

P

01/22/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date