

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000650

FILED  
Jan 25, 2010  
Secretary of State

**Entity Name:** ESP ASSOCIATES OF NORTH CAROLINA, P.A.

**Current Principal Place of Business:**

3475 LAKEMONT BLVD.  
FORT MILL, SC 29708

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 7030  
CHARLOTTE, NC 28241

**New Mailing Address:**

**FEI Number:** 56-1531467      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CORPDIRECT AGENTS, INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301      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: PD  
Name: HENDRICK, JOSEPH W  
Address: 3475 LAKEMONT BLVD.  
City-St-Zip: FORT MILL, SC 29708

Title: VD  
Name: BRUNO, JOSEPH R JR.  
Address: 3475 LAKEMONT BLVD.  
City-St-Zip: FORT MILL, SC 29708

Title: VD  
Name: HORTSTKAMP, EDWARD G III  
Address: 3475 LAKEMONT BLVD.  
City-St-Zip: FORT MILL, SC 29708

Title: VD  
Name: DEAN, DAVID A  
Address: 3475 LAKEMONT BLVD.  
City-St-Zip: FORT MILL, SC 29708

Title: V  
Name: LUCAS, JEFFERY N  
Address: 2636 OAKLEAF CIRCLE  
City-St-Zip: BESSEMER, AL 35022

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: DAVID A DEAN

VD

01/25/2010

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

\_\_\_\_\_ Date