## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F99000003693

Entity Name: A-C EQUIPMENT SERVICES, CORP.

FILED Mar 02, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
6737 W. V	VASHINGTON	STREET		
SUITE 140				
MILVVAUK	(EE, WI 53214	•		
Current Mailing Address:			New Mailing Address:	
SUITE 140	VASHINGTON 00 (EE, WI 53214			
FEI Number	: 39-1858155	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)
Name and	d Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:
CORPOR.	ATION SERVI	CE COMPANY		
1201 HAY	S STREET			
TALLAHA	SSEE, FL 323	012525 US		
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
SIGNATU	RE:			
	Electro	nic Signature of Registered Age	ent	Date
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title:	PD (	) Delete	Title:	() Change () Addition
Name:	VITAS, JOHN J		Name:	
Address:		EWOOD ROAD	Address:	
City-St-Zip:	NEW BERLIN,	VVI 53151	City-St-Zip:	
Title:	VPD (	) Delete	Title:	( ) Change ( ) Addition
Name:	EGAN, SCOTT		Name:	
Address:	3420 MOUNTA	IN DRIVE	Address:	
City-St-Zip:	BROOKFIELD,	WI 53045	City-St-Zip:	
Title:	S (	) Delete	Title:	( ) Change ( ) Addition
Name:	PAULSON, LA		Name:	( )
Address:	,	G BEAVER ROAD	Address:	
City-St-Zip:	TROY, MI 480	84	City-St-Zip:	
Title:	TD (	) Delete	Title:	() Change () Addition
Name:	VOGELEY, JAI		Name:	( ) Sharigo ( ) / Mainton
Address:		TE NORTH PARKWAY STE 300	Address:	
City-St-Zip:	ATLANTA, GA		City-St-Zip:	
Title:	VPD (	) Delete	Title:	( ) Change ( ) Addition
nuc.	,			( ) Sharige ( ) Addition
Name:	I F R R V IV/A P K			
Name: Address:	TERRY, MARK	TE NORTH PARKWAY STE 300	Name: Address:	

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.

City-St-Zip:

SIGNATURE: JOHN J. VITAS PD 03/02/2009

City-St-Zip: ATLANTA, GA 30339