


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # M68290 1. Entity Name ACME DYNAMICS, INC.	
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Principal Place of Business 3608 SYDNEY RD P O BOX 1780 PLANT CITY, FL 33564-1780 US	Mailing Address 3608 SYDNEY RD P O BOX 1780 PLANT CITY, FL 33564-1780 US
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DO NOT WRITE IN THIS SPACE



04232008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2871798	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

MURPHY, JOSEPH A
 4615 GENTRICE DRIVE
 VALRICO, FL 33594

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

000000923171
 05/16/08-80020-010 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MURPHY, JOSEPH A. 4615 GENTRICE DR VALRICO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVD IRWIN, CHRISTOPHER 11404 ORILLA DEL RIO PL TEMPLE TERRACE, FL 33617
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD THARPE, MELVIN D. 4108 PALMETTO BAY DR ELKTON, FL 32033
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph A. Murphy, President 4/23/08 (813) 752-3137

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #