

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000049122

Entity Name: ACME UNLIMITED INC.

FILED  
Apr 23, 2009  
Secretary of State

**Current Principal Place of Business:**

5610 6TH STREET  
ZEPHYRHILLS, FL 33542 US

**New Principal Place of Business:**

**Current Mailing Address:**

5610 6 TH STREET  
ZEPHYRHILLS, FL 33542 US

**New Mailing Address:**

5610 6TH STREET  
ZEPHYRHILLS, FL 33542 US

FEI Number: 59-3718270

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DAVIS, CHRISTOPHER A  
5701 MARIE DR  
ZEPHYRHILLS, FL 33541 US

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

DAVIS, CHRISTOPHER A  
5701 MARIE DRIVE  
ZEPHYRHILLS, FL 33541 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: CHRISTOPHER A DAVIS

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DAVIS, CHRISTOPHER A  
Address: 5701 MARIE DR  
City-St-Zip: ZEPHYRHILLS, FL 33541 US

Title: VP ( ) Delete  
Name: DAVIS, SUSAN F  
Address: 5701 MARIE DRIVE  
City-St-Zip: ZEPHYRHILLS, FL 33541

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

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

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: SUSAN F DAVIS

VP

04/23/2009

Electronic Signature of Signing Officer or Director

Date