

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000087294

FILED
Feb 19, 2007
Secretary of State

Entity Name: ACE PROPERTY MANAGEMENT SERVICES CORPORATION

Current Principal Place of Business:

14117 HAMPSHIRE BAY CIRCLE
WINTER GARDEN, FL 34787

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 622612
ORLANDO, FL 32862

New Mailing Address:

P.O. BOX 620092
ORLANDO, FL 32862 00

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMMOND, WALTER L MR
14117 HAMPSHIRE BAY CIRCLE
WINTER GARDEN, FL 34787 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 () Delete
Name: HAMMOND, WALTER
Address: 14117 HAMPSHIRE BAY CIRCLE
City-St-Zip: WINTER GARDEN, FL 34787

Title: STD () Delete
Name: ALEXANDER, TAMMY
Address: 14117 HAMPSHIRE BAY CIRCLE
City-St-Zip: WINTER GARDEN, FL 34787

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 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: WALTER LEE HAMMOND JR

PD

02/19/2007

Electronic Signature of Signing Officer or Director

_____ Date