

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Montemayor
Secretary of State

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 16 PH 2:50

DOCUMENT # P94000006231 (2)

1. Corporation Name

ACQUISITION CONSULTANTS, INC.

Principal Place of Business

104 STONE HILL DR.
MAITLAND FL 32751

Attorney Address

104 STONE HILL DR.
MAITLAND FL 32751

Do Not Write in This Space

3. Date of Incorporation or Qualification	3a. Date of Last Report
01/26/1994	N/A
4. ID Number	Applied For First Appointment
59-3221023	
5. Contribution of Statute Required	☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under 35, 1993 USC, Florida Statutes.	☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

MOORE, JONATHAN A
104 STONE HILL DR.
MAITLAND FL 32751

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Registered Agent must be handwritten and filed as required)

(Signature of Registered Agent must be handwritten and filed as required)

(Signature)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1. TITLE	☐ Change ☐ Addition
NAME	MOORE, JONATHAN A	1. NAME	
STREET ADDRESS	104 STONE HILL DR.	1. STREET ADDRESS	
CITY, ST, ZIP	MAITLAND FL 32751	1. CITY, ST, ZIP	
TITLE		2. TITLE	☐ Change ☐ Addition
NAME		2. NAME	
STREET ADDRESS		2. STREET ADDRESS	
CITY, ST, ZIP		2. CITY, ST, ZIP	
TITLE		3. TITLE	☐ Change ☐ Addition
NAME		3. NAME	
STREET ADDRESS		3. STREET ADDRESS	
CITY, ST, ZIP		3. CITY, ST, ZIP	
TITLE		4. TITLE	☐ Change ☐ Addition
NAME		4. NAME	
STREET ADDRESS		4. STREET ADDRESS	
CITY, ST, ZIP		4. CITY, ST, ZIP	
TITLE		5. TITLE	☐ Change ☐ Addition
NAME		5. NAME	
STREET ADDRESS		5. STREET ADDRESS	
CITY, ST, ZIP		5. CITY, ST, ZIP	
TITLE		6. TITLE	☐ Change ☐ Addition
NAME		6. NAME	
STREET ADDRESS		6. STREET ADDRESS	
CITY, ST, ZIP		6. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this statement is true and correct, and that I am not aware of any information that would cause me to believe that the information is false or misleading. I further certify that the information made available to the public in the annual report or supplemental annual report is true and accurate and that my signature is a true and accurate copy of the signature of the person who made the statement. I am not aware of any information that would cause me to believe that the information is false or misleading. I further certify that the information made available to the public in the annual report or supplemental annual report is true and accurate and that my signature is a true and accurate copy of the signature of the person who made the statement.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BOARDING OFFICER OR DIRECTOR

2/1/95 (107) 539-1854