

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90096 021 ***150.00

DOCUMENT # F98000000675

1. Entity Name

ACS SYSTEMS, INC.

Principal Place of Business

**2510 N. RED HILL AVE., #230
SANTA ANA CA 92705**

Mailing Address

**2510 N. RED HILL AVE., #230
SANTA ANA CA 92705-5542**

2. Principal Place of Business

3. Mailing Address

6455 East Johns Crossing

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 285

City & State

Duluth, GA

4. FEI Number

33-0206424

Applied For

Not Applicable

Zip

Country

Zip

Country

30097

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MURDOCH, RICHARD A
980 N. FEDERAL HWY., #410
BOCA RATON FL 33432**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPO ATTAWAY, MARK J 2510 N. RED HILL AVE., #230 SANTA ANA CA 92705	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	President/Director John R. Snedegar 2510 N. Redhill Ave, Ste 230 Santa Ana, CA 92705	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CRAIR, STANLEY B 2510 N. RED HILL AVE., #230 SANTA ANA CA 92705	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO/Director Patrick F. Stone 2510 N. Redhill Ave, Ste 230 Santa Ana, CA 92705	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS ELLIS, ERNEST 2510 N. RED HILL AVE., #230 SANTA ANA CA 92705	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFO Dale Christensen 2510 N. Redhill Ave, Ste 230 Santa Ana, CA 92705	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS PUZDER, ANDREW F 2510 N. RED HILL AVE., #230 SANTA ANA CA 92705	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director William Foley 2510 N. Redhill Ave, Ste 230 Santa Ana, CA 92705	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS KANE, M'LISS J 2510 N. RED HILL AVE., #230 SANTA ANA CA 92705	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VCFO CORBIN, BROOKS 2510 N. RED HILL AVE., #230 SANTA ANA CA 92705	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/00

Date

(949) 622-4444

Daytime Phone #

CR2E034 (9/99)