

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003693

Entity Name: A-C EQUIPMENT SERVICES, CORP.**Current Principal Place of Business:**6737 W. WASHINGTON STREET
SUITE 1400
MILWAUKEE, WI 53214**Current Mailing Address:**114 TOWN PARK DRIVE NW
SUITE 300
KENNESAW, GA 30144 US**FEI Number:** 39-1858155**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PD
Name	VITAS, JOHN J
Address	6737 W. WASHINGTON STREET SUITE 1400
City-State-Zip:	MILWAUKEE WI 53214
Title	S
Name	PAULSON, LAWRENCE C
Address	111 WEST JACKSON BOULEVARD SUITE 2400
City-State-Zip:	CHICAGO IL 60604
Title	D
Name	TERRY, MARK S
Address	6737 W. WASHINGTON STREET SUITE 1400
City-State-Zip:	MILWAUKEE WI 53214

Title	VP
Name	EGAN, SCOTT M
Address	1205 LAKESIDE DRIVE
City-State-Zip:	ELM GROVE WI 53122
Title	TD
Name	VOGELEY, JAMES H
Address	6737 W. WASHINGTON STREET SUITE 1400
City-State-Zip:	MILWAUKEE WI 53214

I hereby 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 all other like empowered.

SIGNATURE: LAWRENCE C. PAULSON**SECRETARY****04/28/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date