2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001819

Entity Name: AC ENERGY COMPANY

FILED Aug 23, 2006 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
C/O TROY A. FODOR 913 SOUTH SIXTH ST. SPRINGFIELD, IL 62703					
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
4088 SHOAL LINE BLVD HERNANDO BEACH, FL 34607				3387 SHOAL LINE BLVD HERNANDO BEACH, FL 34607	
FEI Number:	36-4520665	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CALVERT, MARGOT A 3405 AMBERJACK DR SPRING HILL, FL 34607 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					
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	C () E ANDERSON, ROE 913 S SIXTH ST SPRINGFIELD, IL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PT () C CALVERT, GEOR 3405 AMBERJAC HERNANDO BEA	K DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () E BLACKPORT, RC 7340 GALLOP TF CALEDONIA, MI	RTAL, SE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S ()E SUTTER, SHARO 3291 LUGUSTRU HERNANDO BEA	M DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VC () E SUTTER, W. LAN 3291 LUGUSTRU HERNANDO BEA	M DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E GALANT, EDWAF 7213 TROPICAL WEEKI WACHEE	DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
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: GEORGE B CALVERT PT 08/23/2006