

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001819

Entity Name: AC ENERGY COMPANY

FILED
May 08, 2008
Secretary of State

Current Principal Place of Business:

C/O TROY A. FODOR
913 SOUTH SIXTH ST.
SPRINGFIELD, IL 62703

New Principal Place of Business:

4377 COMMERCIAL WAY
304
SPRING HILL, FL 34606

Current Mailing Address:

3387 SHOAL LINE BLVD
HERNANDO BEACH, FL 34607

New Mailing Address:

3405 AMBERJACK DRIVE
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:

CALVERT, MARGOT A
3405 AMBERJACK DR
SPRING HILL, FL 34607 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

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:

Title: C (X) Delete
Name: ANDERSON, ROBERT
Address: 913 S SIXTH ST
City-St-Zip: SPRINGFIELD, IL 62703

Title: PT () Delete
Name: CALVERT, GEORGE B
Address: 3405 AMBERJACK DR
City-St-Zip: HERNANDO BEACH, FL 34607 V

Title: V () Delete
Name: BLACKPORT, ROGER A
Address: 7340 GALLOP TRTAL, SE
City-St-Zip: CALEDONIA, MI 49316

Title: S () Delete
Name: SUTTER, SHARON H
Address: 3291 LUGUSTRUM DR
City-St-Zip: HERNANDO BEACH, FL 34607

Title: VC () Delete
Name: SUTTER, W. LANCE
Address: 3291 LUGUSTRUM DR
City-St-Zip: HERNANDO BEACH, FL 34607

Title: D () Delete
Name: GALANT, EDWARD B
Address: 7213 TROPICAL DR
City-St-Zip: WEEKI WACHEE, FL 34607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

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 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

05/08/2008

Electronic Signature of Signing Officer or Director

Date