


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2007 8:00 am**  
**Secretary of State**

04-23-2007 90252 008 \*\*\*\*61.25

<b>DOCUMENT # F05000005058</b>	
1. Entity Name ACG NORTH FLORIDA, INC.	

Principal Place of Business 616 NORTH FLORIDA CT SUITE 210 PALATINE, IL 60067	Mailing Address 70 WEST MADISON ST SUITE 3500 C/O EASTERLING CHICAGO, IL 60602
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2. Principal Place of Business - No P.O. Box # <b>616 NORTH NORTH CT</b>	3. Mailing Address Suite, Apt. #, etc.
Suite, Apt. #, etc. <b>SUITE 210</b>	Suite, Apt. #, etc.
City & State <b>PALATINE, IL</b>	City & State
Zip <b>60067</b>	Country <b>USA</b>

**40076943**



04032007 Chg-NP CR2E037 (12/06)

6. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	
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7. Name and Address of New Registered Agent	
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>Make check payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARIANATOS, TONY ONE INDEPENDENT DRIVE, #3120 JACKSONVILLE, FL 322021770 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>ADDITIONS: SEE ATTACHED</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V EDELMAN, MATTHEW 6622 SOUTHPOINT DRIVE, SOUTH #495 JACKSONVILLE, FL 32216 <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	VP RAMSEY, SANDRA 6600 CORPORATE CENTER PKWY JACKSONVILLE, FL 32216 <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	V ROSSITER, AL 4905 BELFORT ROAD, #110 JACKSONVILLE, FL 322566007 <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	D ROBBINS, GEORGE 12550 MANDARIN RD JACKSONVILLE, FL 32223 <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	S CALLAHAN, JIM 7746 DEERPOINT POINT JACKSONVILLE, FL 32256 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *C. Gerald Wiggins* **4/19/07** **(904) 354-9600**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT 40076943  
#F05000005058  
ACG North Florida

**OFFICERS**

<u>Name/Address</u>	<u>Title</u>
Mr. Sean Mulholland Mulholland Investigations & Security Consulting 221 Adams Street Jacksonville, FL 32202	VP – Programs
Mr. Ralph Kelly Wachovia 225 Water Street, 2 <sup>nd</sup> floor, FL0074 Jacksonville, FL 32202	Treasurer

**DIRECTORS**

Mr. Tony Marinatos  
Chartwell Capital Management Corporation, Inc.  
One Independent Drive, Suite 3120  
Jacksonville, FL 32202

Mr. Sean Mulholland  
Mulholland Investigations & Security Consulting  
221 Adams Street  
Jacksonville, FL 32202

Mr. Al Rossiter  
Springboard Capital, LLC  
4905 Belfort Road, Suite 110  
Jacksonville, FL 32256

Mr. Matthew Edelman  
Lahnen, Presser & Edelman, P.A.  
6622 Southpoint Road, Suite 495  
Jacksonville, FL 32216

# ATTACHMENT

40076943

Ms. Sandy Ramsey  
Acosta  
6600 Corporate Center Parkway  
Jacksonville, FL 32216

#F05000005058

Mr. James Callahan  
The Callahan Group  
7746 Deerwood Point  
Jacksonville, FL 32256

Mr. Ralph Kelly  
Wachovia  
225 Water Street, 2<sup>nd</sup> floor, FL0074  
Jacksonville, FL 32202

Mr. James Main  
Holland & Knight  
50 N. Laura Street, Suite 3900  
Jacksonville, FL 32202

Mr. Don Wiggins  
Heritage Capital Group, Inc.  
225 Water Street, Suite 1250  
Jacksonville, FL 32202

Mr. John Thompson  
Wachovia Securities  
701 San Marco Blvd., Suite 1900  
Jacksonville, FL 32207

Ms. Susan Cuthbertson  
Managed Accounting Professionals  
9802 Baymeadows Road, Suite 12  
Jacksonville, FL 32256

Mr. John Mahoney  
Allen C. Ewing & Company  
50 N. Laura Street, Suite 3625  
Jacksonville, FL 32202

Mr. Matt Laffey  
Fourth Dimension LLC  
P.O. Box 621  
Fernandina Beach, FL 32035

# ATTACHMENT

Ms. Linda Kelso  
Foley & Lardner  
One Independent Drive, Suite 1300  
Jacksonville, FL 32202

40076943  
# F05000005058

Mr. Graeme Nichol  
OPM Solutions  
1650-302 Margaret Street  
Suite 196  
Jacksonville, FL 32204