2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005058

Entity Name: ACG NORTH FLORIDA, INC.

FILED Mar 31, 2009 Secretary of State

Current Principal Place of Business:			New Princ	ipal Place of Business:	
616 NORTH SUITE 210 PALATINE,	INORTH CT				
Current Mailing Address:			New Mailir	New Mailing Address:	
70 WEST MADISON ST SUITE 3500 C/O EASTERLING CHICAGO, IL 60602					
FEI Number:	20-3343256	FEI Number Applied For ()	El Number Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () CALHOUN, TOM 4803 ORTEGA B JACKSONVILLE,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	EDELMAN, MATT	NT DRIVE, SOUTH #495	Title: Name: Address: City-St-Zip:	VP,D (X) Change () Addition EDELMAN, MATTHEW 6622 SOUTHPOINT DRIVE, SOUTH #495 JACKSONVILLE, FL 32216	
Title: Name: Address: City-St-Zip:	RAMSEY, SANDE	TE CENTER PKWY	Title: Name: Address: City-St-Zip:	VP,D (X) Change () Addition RAMSEY, SANDRA 6630 SOUTHPOINT PKWY. JACKSONVILLE, FL 32216	
Title: Name: Address: City-St-Zip:	D ()EROSSITER, AL 4905 BELFORT I		Title: Name: Address: City-St-Zip:	VP,D (X) Change () Addition ROSSITER, ALAN W 11512 LAKE MEAD BLVD., BLDG. 100 JACKSONVILLE, FL 32256	
Title: Name: Address: City-St-Zip:	D () E ROBBINS, GEOR 12550 MANDARI JACKSONVILLE,	N RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () C CALLAHAN, JIM 7746 DEERPOIN JACKSONVILLE,		Title: Name: Address: City-St-Zip:	S,D (X) Change () Addition CALLAHAN, JIM 7746 DEERPOINT POINT JACKSONVILLE, FL 32256	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES T. EASTERLING MR. 03/31/2009