

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 27, 2006 8:00 am**  
**Secretary of State**

02-27-2006 90089 045 \*\*\*158.75

**DOCUMENT # F05000006290**

1. Entity Name

**ADVANCED ACOUSTIC CONCEPTS, INC.**



Principal Place of Business

**425 OSER AVE.  
HAUPPAUGE NY 11788**

Mailing Address

**425 OSER AVE.  
HAUPPAUGE NY 11788**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

**11-2972554**

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
CARNOVALE, MICHAEL  
425 OSER AVE.  
HAUPPAUGE NY 11788** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**VP  
DONALD COOPER  
1080 EBERLY WAY  
LEMONT FURNACE, PA 15456** ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
BOYLE, BRIAN  
425 OSER AVE.  
HAUPPAUGE NY 11788** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**VP  
PAUL KROGER  
17117 DAHLREN ROAD  
KING GEORGE, VA 22485** ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**V  
LAWLESS, RICHARD  
425 OSER AVE.  
HAUPPAUGE NY 11788** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**VP OF ENGINEERING  
CLAIR GUTHRIE  
7100 COLUMBIA GATEWAY DRIVE, STE 190  
COLUMBIA, MD 21046** ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CFO  
WILLIAMS, SCOTT  
425 OSER AVE.  
HAUPPAUGE NY 11788** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**VP  
ROBERT OLSEN  
7100 COLUMBIA GATEWAY DRIVE, STE 190  
COLUMBIA, MD 21046** ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 607, 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/17/06

631-273-5700