

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006311

FILED
Apr 14, 2008
Secretary of State

Entity Name: ACG TAMPA BAY, INC.

Current Principal Place of Business:

616 N. NORTH COURT
SUITE 200
PALATINE, IL 60067

New Principal Place of Business:

Current Mailing Address:

616 N. NORTH COURT
SUITE 200
PALATINE, IL 60067

New Mailing Address:

70 W. MADISON ST.
SUITE 3500
CHICAGO, IL 60602

FEI Number: 20-3694091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: APPEL, DAVID
Address: PO BOX 1121
City-St-Zip: TAMPA, FL 33601

Title: D () Delete
Name: BOLAND, SUZIE
Address: PO BOX 1121
City-St-Zip: TAMPA, FL 33601

Title: D () Delete
Name: BORASCH, DAN
Address: PO BOX 1121
City-St-Zip: TAMPA, FL 33601

Title: D () Delete
Name: DINGLE, PHIL
Address: PO BOX 1121
City-St-Zip: TAMPA, FL 33601

Title: D () Delete
Name: DUMAR, MATTHEW
Address: PO BOX 1121
City-St-Zip: TAMPA, FL 33601

Title: D () Delete
Name: HENARD, JACK
Address: PO BOX 1121
City-St-Zip: TAMPA, FL 33601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: APPEL, DAVID
Address: PO BOX 112
City-St-Zip: TAMPA, FL 33601

Title: D (X) Change () Addition
Name: BOLAND, SUZIE
Address: PO BOX 112
City-St-Zip: TAMPA, FL 33601

Title: D (X) Change () Addition
Name: BORASCH, DAN
Address: PO BOX 112
City-St-Zip: TAMPA, FL 33601

Title: D (X) Change () Addition
Name: DINGLE, PHIL
Address: PO BOX 112
City-St-Zip: TAMPA, FL 33601

Title: D (X) Change () Addition
Name: DUMAR, MATTHEW
Address: PO BOX 112
City-St-Zip: TAMPA, FL 33601

Title: D (X) Change () Addition
Name: HENARD, JACK
Address: PO BOX 112
City-St-Zip: TAMPA, FL 33601

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.

04/14/2008

Electronic Signature of Signing Officer or Director

Date