

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000443

FILED
Jul 16, 2008
Secretary of State

Entity Name: ASSOCIATED CAPTIVE CONSULTANTS, INC.

Current Principal Place of Business:

10 GLENLAKE PARKWAY, NE
SUITE 130
ATLANTA, GA 30075

New Principal Place of Business:

Current Mailing Address:

10 GLENLAKE PARKWAY, NE
SUITE 130
ATLANTA, GA 30075

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZACK, ROBERT A
3958 DEFOE SQ
SARASOTA, FL 34241 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: CP () Delete
Name: JACOBS, MARK
Address: 10 GLENLAKE PARKWAY, NE, STE 130
City-St-Zip: ATLANTA, GA 30075

Title: S () Delete
Name: KLINGENSMITH, SAM
Address: 10 GLENLAKE PARKWAY, NE, STE 130
City-St-Zip: ATLANTA, GA 30075

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JACOBS, MARK
Address: 10 GLENLAKE PARKWAY, NE, STE 130
City-St-Zip: ATLANTA, GA 30075

Title: DVP (X) Change () Addition
Name: DEARIE-JACOBS, ANN
Address: 10 GLENLAKE PARKWAY, NE, STE 130
City-St-Zip: ATLANTA, GA 30075

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: MARK JACOBS

PD

07/16/2008

Electronic Signature of Signing Officer or Director

Date