

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000001440

FILED
Mar 15, 2011
Secretary of State

Entity Name: ACTION CATASTROPHE TEAM, INC.

Current Principal Place of Business:

3410 HWY 281 SOUTH
MINERAL WELLS, TX 76067

New Principal Place of Business:

823 S. SIXTH ST.
100
LAS VEGAS, NV 89101

Current Mailing Address:

1859 SHORE DR. S # 209
SAINT PETERSBRUG, FL 33707

New Mailing Address:

3410 HWY. 281 SOUTH
MINERAL WELLS, TX 76067

FEI Number: 20-5162234

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, CLAYTON
11490 CLEAR CREEK DR
PENSACOLA, FL 32514 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: C
Name: CARTER, CHARLES D
Address: 823 S SIXTH STREET SUITE 100
City-St-Zip: LAS VEGAS, NV 89101

Title: DP
Name: NOWAKOWSKI, TOM
Address: 823 S SIXTH STREET SUITE 100
City-St-Zip: LAS VEGAS, NV 89101

Title: ST
Name: HAWKINS, NANCY
Address: 823 S SIXTH STREET SUITE 100
City-St-Zip: LAS VEGAS, NV 89101

I hereby 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 all other like empowered.

SIGNATURE: CHARLES D. CARTER

D

03/15/2011

Electronic Signature of Signing Officer or Director

Date