2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000005338

Entity Name: ACMC REALTY, INC.

FILED Jan 04, 2005 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
	OURA RD			
200 CALABAS	SAS HILLS, CA 91	1301 US		
	·	1001 00		
Current N	Mailing Address:		New Mailing Addres	SS:
26901 AG 200	OURA RD			
	SAS HILL, CA 913	01 US		
FEI Number	r: 95-4537645	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of Cui	rent Registered Agent:	Name and Address	of New Registered Agent:
526 E. PA	RVICES, INC. RK AVE. SSEE, FL 32301	US		
	e named entity sub e of Florida.	omits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
OLONIATII	DE:			
SIGNATU	RE.			
SIGNATU		Signature of Registered Ag	gent	Date
	Electronic	Signature of Registered Agrust Fund Contribution ().	gent	Date
	Electronic	rust Fund Contribution ().		Date BES TO OFFICERS AND DIRECTORS
Election Cal OFFICER Title: Name: Address:	Electronic	rust Fund Contribution (). ORS: elete 0 J D, STE 200		
Election Ca	Electronic mpaign Financing To S AND DIRECTO PD () De LEVINE, HOWARD 26901 AGOURA R	rust Fund Contribution (). PRS: elete D, J D, STE 200 S, CA 91301 elete L D, STE 200	ADDITIONS/CHANG Title: Name: Address:	SES TO OFFICERS AND DIRECTORS
Election Cal OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electronic mpaign Financing To S AND DIRECTO PD () De LEVINE, HOWARD 26901 AGOURA R CALABASAS HILL: EVP () De WHITE, TIMOTHY 26901 AGOURA R	rust Fund Contribution (). PRS: elete D J D, STE 200 S, CA 91301 elete L D, STE 200 S, CA 91301 elete D, STE 200 S, CA 91301	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	SES TO OFFICERS AND DIRECTORS () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TIMOTHY L. WHITE EVP 01/04/2005