


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 02, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # F96000002855	
1. Entity Name ACSR, INC.	

Principal Place of Business 400 REDLAND COURT SUITE 114 OWINGS MILLS, MD 21117	Mailing Address 400 REDLAND COURT SUITE 114 OWINGS MILLS, MD 21117
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DO NOT WRITE IN THIS SPACE



07182007 No Chg-P CR2E034 (11/05)

4. FEI Number 63-1162642	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

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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 \_\_\_\_\_ DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BALDOCK, KRIS 400 REDLAND COURT, SUITE 114 OWINGS MILLS, MD 21117
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO SUNDERLAND, RICK 400 REDLAND COURT, SUITE 114 OWINGS MILLS, MD 21117
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP COX, MELANIE 400 REDLAND COURT, SUITE 114 OWINGS MILLS, MD 21117
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Richard W. Sunderland* **RICHARD W. SUNDERLAND** *W*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **7/21/2007** **443-548-2200**  
Date Daytime Phone #