

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Dec 15, 2009  
Secretary of State**

DOCUMENT# F98000003743

Entity Name: ACS HOLDING SYSTEMS, INC.

**Current Principal Place of Business:**

3301 BONITA BEACH ROAD  
SUITE 101  
BONITA SPRINGS, FL 34134 US

**New Principal Place of Business:**

24311 WALDEN CENTER DRIVE  
SUITE 300  
BONITA SPRINGS, FL 34134 US

**Current Mailing Address:**

3301 BONITA BEACH ROAD  
SUITE 101  
BONITA SPRINGS, FL 34134 US

**New Mailing Address:**

24311 WALDEN CENTER DRIVE  
SUITE 300  
BONITA SPRINGS, FL 34134 US

FEI Number: 59-3518596      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HUTCHINSON, RICHARD  
3301 BONITA BEACH ROAD  
SUITE 101  
BONITA SPRINGS, FL 34134 US

**Name and Address of New Registered Agent:**

ACKERMAN, DON E  
24311 WALDEN CENTER DRIVE  
SUITE 300  
BONITA SPRINGS, FL 34134 US

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: DON E. ACKERMAN      12/15/2009  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: HOFFMAN, MATTHEW P  
Address: 3301 BONITA BEACH RD SUITE 101  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D      (X) Delete  
Name: ACKERMAN, DON E  
Address: 3301 BONITA BEACH RD SUITE 101  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: P      (X) Delete  
Name: HARRISON, THOMAS  
Address: 3301 BONITA BEACH RD SUITE 101  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: S      (X) Delete  
Name: HUTCHINSON, RICHARD  
Address: 3301 BONITA BEACH RD SUITE 101  
City-St-Zip: BONITA SPRINGS, FL 34134

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPS      (X) Change ( ) Addition  
Name: ACKERMAN, DON E  
Address: 24311 WALDEN CENTER DRIVE  
City-St-Zip: SUITE 300, FL 34134

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DON E. ACKERMAN      PRES      12/15/2009  
Electronic Signature of Signing Officer or Director      Date