

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005623

Entity Name: ACN HOLDING, INC.

FILED  
Apr 17, 2006  
Secretary of State

## Current Principal Place of Business:

LEO FACKLER  
PO BOX 1523  
WINDERMERE, FL 34786

## New Principal Place of Business:

## Current Mailing Address:

LEO FACKLER  
PO BOX 1523  
WINDERMERE, FL 34786

## New Mailing Address:

FEI Number: 59-3503411

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FACKLER, LEO  
7635 ASHLEY PARK CT  
SUITE 503C  
ORLANDO, FL 32835 US

## Name and Address of New Registered Agent:

FACKLER, LEO  
7635 ASHLEY PARK CT  
SUITE 503L  
ORLANDO, FL 32835 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:

04/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FACKLER, LEO  
Address: 7635 ASHLEY PARK CT, STE 503C  
City-St-Zip: ORLANDO, FL 32835

Title: DST ( ) Delete  
Name: MARUYAMA, JEFF  
Address: 1911 NORTH FT MYER DRIVE, SUITE 307  
City-St-Zip: ARLINGTON, VA 22209

Title: D ( ) Delete  
Name: SPENCER, LORNA  
Address: 8827 COLUMBIA PARKWAY, SUITE 1A  
City-St-Zip: COLUMBIA M, MD 21045

Title: D ( ) Delete  
Name: FRIEDMAN, ALAN  
Address: 850 7 AVE, STE 305  
City-St-Zip: NEW YORK, NY 10019

Title: D ( ) Delete  
Name: VIGIL, MICHAEL  
Address: 248 COLUMBIA TURNPIKE  
City-St-Zip: FLORHAM PARK, NJ 07932

Title: D ( ) Delete  
Name: NESBIT, ELEANOR  
Address: 1413 SOUTH HOWARD AVE., SUITE 201  
City-St-Zip: TAMPA, FL 33606

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: FACKLER, LEO  
Address: 7635 ASHLEY PARK CT, STE 503L  
City-St-Zip: ORLANDO, FL 32835

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

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

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 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: LEO FACKLER

PD

04/17/2006

Electronic Signature of Signing Officer or Director

Date