2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G73535

Title:

Name:

Address:

City-St-Zip:

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BAER, JENNIFER E

9251 HIGHWAY 52

WIGGINS, CO 80654

Entity Name: A & C ENGEL ENTERPRISES INCORPORATED

FILED Feb 17, 2009 Secretary of State

Littly Na	ille. A & C EIN	JEL ENTERPRISES INCORP	ORATED				
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
	ELYN COURT HILL, FL 34610						
Current Mailing Address:			New Maili	New Mailing Address:			
	ELYN COURT IILL, FL 34610						
FEI Number	: 59-2355057	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired	()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
SUITE 201 BROOKS\ The above	RTEZ BOULEV I /ILLE, FL 3461 • named entity s		ourpose of changing i	ts registered	office or registered agent, or	r both,	
in the State SIGNATUI	e of Florida.						
	Electron	ic Signature of Registered Age	ent		Date		
Election Ca	mpaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PTD () ENGEL, CAROL 17616 EVELYN SPRING HILL, F	COURT	Title: Name: Address: City-St-Zip:	PTD (ENGEL, CAR 17616 EVEL ^N SPRING HILL	/N COURT		
Title: Name: Address: City-St-Zip:	VSD () ENGEL, JASON 5469 ALDERWO SPRING HILL, F	OOD STREET	Title: Name: Address: City-St-Zip:	ENGEL, JASO 5469 ALDER	X) Change () Addition DN S WOOD STREET ., FL 346063907		

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CAROLYN F. ENGEL PTD 02/17/2009

() Change () Addition