2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2005 8:00 am
Secretary of State
02-23-2005 90078 007 ***150.00

RECD JAN 31 2005

1st MOORE CR2E034-(10/04)

DOCUMENT # H86924

1. Entity Name

ACORN GROUP, INC. OF FLORIDA

Principal Place of Business	Mailing Address
1 N PENNSYVANIA ST #300 INDIANAPOLIS IN 46204 US	P.O. BOX 441370 INDIANAPOLIS IN 46244-1370 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 58-1658305 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MEYERS, DAVID
2400 S RIDGEWOOD AVENUE #52
DAYTONA BEACH FL 32119

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable) 22 Esperanto Drive

City Palm Coast FL Zip Code 32164

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 [signature] David Meyers — 01-31-05

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

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSD MEYERS, DAVID 2400 S. RIDGEWOOD AVE., #52 SOUTH DAYTONA FL 32119	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	22 Esperanto Drive Palm Coast, FL 32164	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DONATO, ALBERT 1 N PENNSYLVANIA ST #300 INDIANAPOLIS IN 46204	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: [signature] 01-31-05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

David Meyers