## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# J41743

FILED Jun 15, 2009 Secretary of State

Entity Name: AMERICAN COMPUTER TECHNOLOGIES, INC.

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
2200 LUCIEN #195	WAY		276 SNOWFIELDS RUN HEATHROW, FL 32746		
MAITLAND, F	FL 32751	US	TIEATHNOVV, TE 32740		
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
PO BOX 9483 MAITLAND, F		US	PO BOX 948394 MAITLAND, FL 32794		
El Number: 59	-2750857	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and A	ddress of C	urrent Registered Agent:	Name and Address of I	New Registered Agent:	
NRAI SERVIC 2731 EXECU' SUITE 4 WESTON, FL	TIVÉ PARK				
Γhe above na n the State of		submits this statement for the p	ourpose of changing its registered o	office or registered agent, or both,	
SIGNATURE:					
SIGNATURE:		ic Signature of Registered Age	ent	Date	
n accordance v	Electron	3(2)(b), F.S., the corporation did no		Date	
	Electron with s. 607.19 aign Financing	3(2)(b), F.S., the corporation did no g Trust Fund Contribution ( ).	ot receive the prior notice.	Date  TO OFFICERS AND DIRECTORS	
n accordance velection Campa  DFFICERS A  itle: D  lame: W  address: 2	Electron with s. 607.19 aign Financing	(2)(b), F.S., the corporation did no g Trust Fund Contribution ( ). TORS: Delete E. DS RUN	ot receive the prior notice.  ADDITIONS/CHANGES		
n accordance villection Campa  DFFICERS A  Title: D  Idame: W  City-St-Zip: H  Title: D  Idame: S  Idame: S  Idame: S  Idame: S  Idame: S	Electron with s. 607.19: aign Financing AND DIREC DP () VYNIA, BRUCE 176 SNOWFIEL HEATHROW, F DVP () CHEALY, JOHN	3(2)(b), F.S., the corporation did not Trust Fund Contribution ( ). TORS:  Delete  DS RUN L 32746  Delete	ADDITIONS/CHANGES  Title: ( Name: Address: City-St-Zip:	TO OFFICERS AND DIRECTORS	

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: BRUCE WYNIA DP 06/15/2009