2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J65776

FILED Sep 15, 2009 Secretary of State

Entity Name: AMERICA'S CALL CENTER, INC.						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
% C. RICHARD EMBERSON 7901 BAYMEADOWS WAY, STE 14 JACKSONVILLE, FL 32256						
Current Mailing Address:			New Mailing Address:			
% C. RICHARD EMBERSON 7901 BAYMEADOWS WAY, STE 14 JACKSONVILLE, FL 32256						
FEI Number:	59-2798244	FEI Number Applied For ()	FEI Number Not Appli	icable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
EMBERSON, C. RICHARD 7901 BAYMEADOWS WAY SUITE 14 JACKSONVILLE, FL 32216 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:						
Electronic Signature of Registered Agent				Date		
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	EMBERSON, 0	DOWS WAY #14	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	EMBERSON, N	DOWS WAY #14	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	EMBERSON, I	DOWS WAY STE 14	Title: Name: Address: City-St-Zip:	V (X) Change () Addition EMBERSON, DAVID R 7901 BAYMEADOWS WAY STE 14 JACKSONVILLE, FL 32256		
Title: Name: Address: City-St-Zip:	EMBERSON, H	DOWS WAY STE 14	Title: Name: Address: City-St-Zip:	V (X) Change () Addition EMBERSON, HARRY C 7901 BAYMEADOWS WAY STE 14 JACKSONVILLE, F 32256		
Title [.]	V () Delete	Title:	V (X) Change () Addition		

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.

Name:

Address:

City-St-Zip:

RIDENHOUR, ÁLISON E

JACKSONVILLE, FL 32256

7901 BAYMEADOWS WAY STE 14

SIGNATURE: C. RICHARD EMBERSON CEO 09/15/2009

RIDENHOUR, ALISON E

JACKSONVILLE, FL

7901 BAYMEADOWS WAY STE 14

Name:

Address:

City-St-Zip: