

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J65776

FILED
Mar 02, 2010
Secretary of State

Entity Name: AMERICA'S CALL CENTER, INC.

Current Principal Place of Business:

% C. RICHARD EMBERSON
7901 BAYMEADOWS WAY, STE 14
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

% C. RICHARD EMBERSON
7901 BAYMEADOWS WAY, STE 14
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 59-2798244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EMBERSON, C. RICHARD
7901 BAYMEADOWS WAY
SUITE 14
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST
Name: EMBERSON, C. RICHARD
Address: 7901 BAYMEADOWS WAY #14
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP
Name: EMBERSON, NANCY S.
Address: 7901 BAYMEADOWS WAY #14
City-St-Zip: JACKSONVILLE, FL 32256

Title: V
Name: EMBERSON, DAVID R
Address: 7901 BAYMEADOWS WAY STE 14
City-St-Zip: JACKSONVILLE, FL 32256

Title: V
Name: EMBERSON, HARRY C
Address: 7901 BAYMEADOWS WAY STE 14
City-St-Zip: JACKSONVILLE, F 32256

Title: V
Name: RIDENHOUR, ALISON E
Address: 7901 BAYMEADOWS WAY STE 14
City-St-Zip: JACKSONVILLE, FL 32256

I hereby 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 all other like empowered.

SIGNATURE: C. RICHARD EMBERSON

CEO

03/02/2010

Electronic Signature of Signing Officer or Director

_____ Date