

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
May 02, 2006
Secretary of State**

DOCUMENT# L03000048672

Entity Name: ACN-LOGISTICS, LLC

Current Principal Place of Business:

12200 W COLONIAL DRIVE
SUITE 302
WINTER GARDEN, FL 34787

New Principal Place of Business:

Current Mailing Address:

12200 W COLONIAL DRIVE
SUITE 302
WINTER GARDEN, FL 34787

New Mailing Address:

FEI Number: 20-0774534 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MURPHY, J. MICHAEL
12200 W COLONIAL DRIVE
WINTER GARDEN, FL 34787 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

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: P () Delete
Name: MURPHY, J. MICHAEL
Address: 12200 W COLONIAL DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

Title: D (X) Change () Addition
Name: MURPHY, J. MICHAEL
Address: 12200 W COLONIAL DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGRM () Delete
Name: AMERICAN CONTAINER N, ET, INC.
Address: 12200 W COLONIAL DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: J. MICHAEL MURPHY

D

05/02/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date