


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

8/ **FILED**
Aug 26, 2004 8:00 am
Secretary of State

08-10-2004 90003 005 ***150.00

DOCUMENT # P00000035335 1. Entity Name AMERICAN CORPORATE INVESTMENT GROUP, INC.	
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Principal Place of Business 3506 NIGHTHAWK LANE PENSACOLA, FL 32506	Mailing Address 1851 SANDRA DR. PENSACOLA, FL 32506
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66432647



07152004 No Chg-P CR2E034 (10/03)

4. FEI Number 02-0613191	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ASHCRAFT, RANDY C
3506 NIGHTHAWK LANE
PENSACOLA, FL 32506**

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

7/27/04
DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.183(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ASHCRAFT, RANDY C 3506 NIGHTHAWK LANE PENSACOLA, FL 32506
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HIGGINBOTHAM, WARREN E 1851 SANDRA DR. PENSACOLA, FL 32506
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(h), 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, without other fee empowered.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/27/04
DATE

456-6608
Daytime Phone #