

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P00000110394**

1. Entity Name

ACR SOUND ENTERTAINMENT, INC.



Principal Place of Business

1515 COVERED BRIDGE RD.  
DELAND, FL 32724

Mailing Address

1515 COVERED BRIDGE RD.  
DELAND, FL 32724



04282006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3865142

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RANDOLPH, ANA  
1515 COVERED BRIDGE RD.  
DELAND, FL 32724

**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)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	RANDOLPH, ANA C
STREET ADDRESS	1515 COVERED BRIDGE RD.
CITY-ST-ZIP	DELAND, FL 32724
TITLE	P
NAME	RANDOLPH, ANA
STREET ADDRESS	1515 COVERED BRIDGE RD.
CITY-ST-ZIP	DELAND, FL 32724
TITLE	T
NAME	RANDOLPH, ANDREW J
STREET ADDRESS	1515 COVERED BRIDGE RD.
CITY-ST-ZIP	DELAND, FL 32724
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100000560886  
05/18/06-80055-025 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Andrew J. Randolph* (Treasurer) 4/3/06  
Andrew J. Randolph

Daytime Phone

386-734-098