2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000034895

Entity Name: ACSF HOLDINGS, INC.

Address:

City-St-Zip:

850 WEST LAKE OTIS DR

WINTER HAVEN, FL 33880

FILED Feb 22, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 505 SOUTH FLAGLER DRIVE STE 1100 WEST PALM BEACH, FL 33401 **Current Mailing Address: New Mailing Address:** PO BOX 433 WINTER HAVEN, FL 33880 FEI Number: 65-1103948 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PORTLUCK, SAMUEL W III PORTLOCK, SAMUEL W III 101 CYPRESS GARDENS BLVD. 101 CYPRESS GARDENS BLVD. WINTER HAVEN, FL 33880 WINTER HAVEN, FL 33880 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: SAM PORTLOCK 02/22/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition HENRY, ANN P Name: Name: 3028 WASHINGTON ROAD Address: Address: City-St-Zip: WEST PALM BEACH, FL 33405 City-St-Zip: Title: Title: () Delete () Change () Addition MCADAMS, CLARE P Name: Name: 600 ISLAND WAY Address: Address: WINTER HAVEN, FL 33884 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition PORTLOCK, SAMUEL W III Name: Name: 9 BROGDON CT SE Address: Address: City-St-Zip: WINTER HAVEN, FL 33880 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition PORTLOCK, FRANK D Name: Name:

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 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.

Address:

City-St-Zip:

SIGNATURE: SAM PORTLOCK Τ 02/22/2007