

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000052148 1. Entity Name ASC MANAGEMENT SERVICES, INC.			
Principal Place of Business 1325 SAN MARCO BLVD, SUITE 701 JACKSONVILLE, FL 32207		Mailing Address 1325 SAN MARCO BLVD, SUITE 701 JACKSONVILLE, FL 32207	
DO NOT WRITE IN THIS SPACE		 04262006 No Chg-P CR2E034 (11/05)	
4. FEI Number 59-3729772		☐ Applied For ☐ Not Applicable	
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SCHARF, MICHAEL S 1325 SAN MARCO BLVD, SUITE 701 JACKSONVILLE, FL 32207		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 _____ (NOTE: Registered Agent signature required when reinstating) _____ 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	
U00000542801 05/10/06-80112-015 150.00		DO NOT WRITE IN THIS SPACE	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHARF, MICHAEL S 1325 SAN MARCO BLVD, SUITE 701 JACKSONVILLE, FL 32207		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUCIE, R STEPHEN 1325 SAN MARCO BLVD, SUITE 701 JACKSONVILLE, FL 32207		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KITAY, GARRY 1325 SAN MARCO BLVD, SUITE 701 JACKSONVILLE, FL 32207		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TANDRON, CARLOS R 1325 SAN MARCO BLVD, SUITE 701 JACKSONVILLE, FL 32207		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TANDRON, CARLOS R 1325 SAN MARCO BLVD, SUITE 701 JACKSONVILLE, FL 32207		
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: ✓		R Stephen Lucie 4/29/06 904 858-6451 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #	