2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# P01000088117

Entity Name: A & C OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

880 HWY 29 SOUTH
CANTONMENT, FL 32533

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 427
DOVER, FL 33527

New Mailing Address:

880 HWY 29 SOUTH
CANTONMENT, FL 32533

FEI Number: 59-3748356 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YATES SR, ANTHONY
4227 MOORES LAKE RD
DOVER, FL 33527 US

Name and Address of New Registered Agent:

YATES SR, ANTHONY
6260 LULA RD.
MOLINO, FL 32577 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: ANTHONY YATES 04/14/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: YATES, CHERYL R
Address: 4227 MOORES LAKE RD
City-St-Zip: DOVER, FL 33527

Title: D ( ) Delete
Name: YATES, ANTHONY
Address: 4227 MOORES LAKE RD
City-St-Zip: DOVER, FL 33527

Title: D ( ) Delete
Name: WALLACE, RICHARD A
Address: 4609 FORSYTH STREET
City-St-Zip: BAGDAD, FL 32530

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: YATES, CHERYL R
Address: 6260 LULA RD.
City-St-Zip: MOLINO, FL 32577

Title: D (X) Change ( ) Addition
Name: YATES, ANTHONY
Address: 6260 LULA RD.
City-St-Zip: MOLINO, FL 32577 US

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

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: ANTHONY YATES VP 04/14/2009
Electronic Signature of Signing Officer or Director Date