2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# P01000103986

Entity Name: ACS GENERAL PARTNERS, INC.

Current Principal Place of Business:

321 HIGH ST
TARPON SPRINGS, FL 34689

New Principal Place of Business:

Current Mailing Address:

P O BOX 1293
TARPON SPRINGS, FL 34688

New Mailing Address:

FEI Number: 59-3752743 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARQUARDT, EMIL C JR. ESQ
625 COURT STREET, SUITE 200
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: AIDE, JOHN
Address: 321 HIGH STREET
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VSTD ( ) Delete
Name: COLEMAN, TERESA A
Address: 613 WIDEVIEW AVE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: PD ( ) Delete
Name: AIDE, DAVID B
Address: 1538 RIVERSIDE DRIVE
City-St-Zip: TARPON SPRINGS, FL 34689

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: DAVID B. AIDE PD 04/13/2009

Electronic Signature of Signing Officer or Director — Date