2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

1. Entity Name

NAME

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

COLEMAN, TERESA A

AIDE, DAVID B

706 N FLORIDA AVENUE

1538 RIVERSIDE DRIVE

TARPON SPRINGS FL 34689

TARPON SPRINGS FL 34689

4875 ALTERNATE 19

TARPON SPRINGS FL 34689



P01000103986 DOCUMENT # ACS GENERAL PARTNERS, INC. Mailing Address Principal Place of Business

P O BOX 1293

TARPON SPRINGS FL 34688

2. Principal Place of Business 3. Mailing Address 321 Hiah Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 59-3752743 Not Applicable arpon Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MARQUARDT, EMIL C JR. ESQ Street Address (P.O. Box Number is Not Acceptable) 625 COURT STREET, SUITE 200 **CLEARWATER FL 33756** Zip Code City 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 . DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. ☐ Addition ☐ Change ☐ Defete TITLE TITLE NAMÈ AIDE, JOHN NAME STREET ADDRESS 321 HIGH STREET STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **TARPON SPRINGS FL 34689** Addition Change TITLE ☐ Delete TITLE NAME NAME AIDE, MARY ANN STREET ADDRESS STREET ADDRESS 321 HIGH STREET CITY-ST-ZIP CITY-ST-ZIP TARPON SPRINGS FL 34689 ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME SIKES. LOUISE STREET ADDRESS STREET ADDRESS **106 BANANA STREET** CITY-ST-ZIP CITY-ST-ZIP TARPON SPRINGS FL 34689-D

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ Delete

□ Delete

☐ Delete

BECTERESa. A. Coleman 4/10/03 (727)937-1711

Apr 14, 2003 8:00 am Secretary of State

FILED

Change

Change

COLEMAN, TERESA A

AIDE, DAVID B

TARPON SPRINGS, FL 34689

☐ Addition

☐ Addition

☐ Addition