

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000005322

Entity Name: ACSYSTEMS, INCORPORATED

FILED  
Mar 23, 2009  
Secretary of State

**Current Principal Place of Business:**

9720 NW 48 DRIVE  
CORAL SPRINGS, FL 33076

**New Principal Place of Business:**

**Current Mailing Address:**

9720 NW 48 DRIVE  
CORAL SPRINGS, FL 33076

**New Mailing Address:**

FEI Number: 60-0002003

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JONES, JENNIFER  
9720 NW 48 DRIVE  
CORAL SPRINGS, FL 33076 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: PD ( ) Delete  
Name: LEAR, CECILIA  
Address: 10 THUNDER LANE  
City-St-Zip: CHARLEMONT, MA 01339

Title: VD ( ) Delete  
Name: JONES, JENNIFER  
Address: 9720 NW 48 DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: JONES, JENNIFER D  
Address: 9720 NW 48 DR  
City-St-Zip: CORAL SPRINGS, FL 33076 US

Title: VD (X) Change ( ) Addition  
Name: LEAR, CECILIA  
Address: 10 THUNDER LANE  
City-St-Zip: CHARLEMONT, MA 01339 US

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: JENNIFER JONES

PD

03/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date