

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000128587

FILED
Mar 29, 2004
Secretary of State

Entity Name: AMERICAN COMPLETE SERVICES, INC.

Current Principal Place of Business:

3625 WEST FIRST ST
SANFORD, FL 32771 US

New Principal Place of Business:

700 SOUTH FRENCH AVENUE
SANFORD, FL 32771 US

Current Mailing Address:

3625 WEST FIRST ST
SANFORD, FL 32771 US

New Mailing Address:

700 SOUTH FRENCH AVENUE
SANFORD, FL 32771 US

FEI Number: 14-1859372

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALTHERS, STEVE P
3625 WEST FIRST ST
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

WALTHERS, STEVE P
700 SOUTH FRENCH AVENUE
SANFORD, FL 32771 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: STEVE P. WALTHERS

03/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WALTHERS, STEVE P
Address: 308 WEST 13TH STREET
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: DELLO RUSSO, ROBERT G
Address: 109 COMMERCE ST., #1101
City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete
Name: BARTON, HOWARD C
Address: 3551 WEST 1ST STREET
City-St-Zip: SANFORD, FL 32771

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 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 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: STEVE P. WALTHERS

PD

03/29/2004

Electronic Signature of Signing Officer or Director

Date