

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000000073

FILED
Jan 04, 2006
Secretary of State

Entity Name: ACME EQUIPMENT COMPANY

Current Principal Place of Business:

15424 FLIGHT PATH DRIVE
BROOKSVILLE, FL 34604

New Principal Place of Business:

Current Mailing Address:

15424 FLIGHT PATH DRIVE
BROOKSVILLE, FL 34604

New Mailing Address:

FEI Number: 55-0809832

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, TIM
4436 COMMERCIAL WAY
SPRING HILL, FL 34606 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: HOFFMAN, MARYANN
Address: 1024 CONCERT AVE.
City-St-Zip: SPRING HILL, FL 34609

Title: TD () Delete
Name: SHAPPELL, DAVID
Address: 18532 CEDARBROOK CT.
City-St-Zip: HUDSON, FL 34667

Title: SC () Delete
Name: HOFFMAN, RICHARD
Address: 1024 CONCERT AVE
City-St-Zip: SPRING HILL, FL 34609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: SHAPPELL, DAVID
Address: 4930 LARKENHEATH DRIVE
City-St-Zip: SPRING HILL, FL 34609

Title: SC (X) Change () Addition
Name: SHAPPELL, VICTORIA
Address: 4930 LARKENHEATH DRIVE
City-St-Zip: SPRING HILL, FL 34609

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

TD

01/04/2006

Electronic Signature of Signing Officer or Director

Date