2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2009
Secretary of State

DOCUMENT# P03000015991

Entity Name: A.C. SCHULTES OF FLORIDA, INC.

Current Principal Place of Business:

11865 US HIGHWAY 41 SOUTH
GIBSONTON, FL 33534

New Principal Place of Business:

Current Mailing Address:

11865 US HIGHWAY 41 SOUTH
GIBSONTON, FL 33534

New Mailing Address:

FEI Number: 14-1871186 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

OBRIEN, JOHN T
1740 AMBERWYND CIRCLE
PALMETTO, FL 34221 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:	SCHULTES, AUGUST C III	
Address:	664 S EVERGREEN AVE	
City-St-Zip:	WOODBURY HEIGHTS, NJ 08097	
Title:	P	( ) Delete
Name:	OBRIEN, JOHN T	
Address:	11865 US HWY 41 SOUTH	
City-St-Zip:	GIBSONTON, FL 33534	
Title:	VP	( ) Delete
Name:	SCHULTES, AUGUST C IV	
Address:	664 S. EVERGREEN AVE	
City-St-Zip:	WOODBURY HEIGHTS, NJ 08097	
Title:	ST	( ) Delete
Name:	DEMATTE, JEFFREY	
Address:	664 S. EVERGREEN AVE	
City-St-Zip:	WOODBURY HEIGHTS, NJ 08097	

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:	
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: JEFFREY A. DEMATTE ST 01/23/2009

Electronic Signature of Signing Officer or Director — Date