

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000050213

Entity Name: A.M.A.C., INC.

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2935 SE 58TH AVENUE  
OCALA, FL 34480

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 189  
OCALA, FL 34478

**New Mailing Address:**

FEI Number: 56-2359930

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MAZZURCO, ANDREW S  
2935 SE 58TH AVENUE  
OCALA, FL 34480 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

**OFFICERS AND DIRECTORS:**

Title: DPS  
Name: MAZZURCO, ANDREW S  
Address: P.O. BOX 189  
City-St-Zip: Ocala, FL 34478

Title: DVP  
Name: WILBURN, MACK  
Address: P.O. BOX 189  
City-St-Zip: Ocala, FL 34478

I hereby 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 all other like empowered.

SIGNATURE: ANDREW S. MAZZURCO

DPS

03/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date