## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000026164

Entity Name: ACT PROFESSIONAL SCHOOLS, INC.

FILED Apr 06, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	BOD TRAIL OD, FL 32750				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	BOD TRAIL OD, FL 32750				
FEI Number	: 90-0147110	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
	R, ALAN BOD TRAIL OD, FL 32750	US			
	e named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CD () TRAUGER, ALAI 124 ICHABOD T LONGWOOD, F	RAIL	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	P () TRAUGER, DER 124 ICHABOD T LONGWOOD, F	RAIL	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	
Title: Name: Address: City-St-Zip:	SD () TRAUGER, JANI 124 ICHABOD T LONGWOOD, F	RAIL	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition	

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: SIGNATURE C 04/06/2009