

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000096467

FILED
Mar 05, 2005
Secretary of State

Entity Name: ANCIENT CITY INVESTMENT GROUP, INC.

Current Principal Place of Business:

8 BARU RD
ST AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

8 BARU RD
ST AUGUSTINE, FL 32084

New Mailing Address:

FEI Number: 20-2438949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNEDEKER, ERIC
8 BARU RD
ST AUGUSTINE, FL 32084 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: SNEDEKER, ERIC
Address: 8 BARU RD
City-St-Zip: ST AUGUSTINE, FL 32084

Title: D () Delete
Name: FECHTER, SCOTT
Address: 322 VAILEY BUNKER CT
City-St-Zip: ST AUGUSTINE, FL 32080

Title: D () Delete
Name: SKARE, SCOTT
Address: 520 ANCHOR POINT
City-St-Zip: DELRAY BEACH, FL 33444

Title: D () Delete
Name: AMERSON, SUE
Address: 5610 B DATIL PEPPER RD
City-St-Zip: ST AUGUSTINE, FL 32086

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 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: ERIC SNEDEKER

D

03/05/2005

Electronic Signature of Signing Officer or Director

_____ Date