

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000136079

FILED  
Feb 19, 2010  
Secretary of State

**Entity Name:** ACROPOLIS INVESTMENTS, INC.

**Current Principal Place of Business:**

4375 WOODBINE ROAD  
PACE, FL 32571

**New Principal Place of Business:**

**Current Mailing Address:**

4375 WOODBINE ROAD  
SUITE 7  
PACE, FL 32571

**New Mailing Address:**

**FEI Number:** 20-1693365      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LOCKLIN, JACK JR.  
6460 JUSTICE AVENUE  
MILTON, FL 32570 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: P  
Name: WILLIAMS, BOBBY L  
Address: 5980 GRANDVIEW DRIVE  
City-St-Zip: MILTON, FL 32570

Title: VP  
Name: LEHNERTZ, JEFFREY B  
Address: 10295 MEADE HALL  
City-St-Zip: MECHANICSVILLE, VA 23116

Title: VP/T  
Name: FONG, PERRY Y  
Address: 96 SNOOK PATH  
City-St-Zip: MARS HILL, NC 28754 US

Title: VP  
Name: RICH, CHUCK  
Address: 3510 FIRESTONE BLVD.  
City-St-Zip: PENSACOLA, FL 32503 US

Title: VP  
Name: BAUYERE, MARK J  
Address: 5938 RIDGE FORD DRIVE  
City-St-Zip: BURKE, VA 22015

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: BOBBY WILLIAMS

PRES

02/19/2010

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

\_\_\_\_\_  
Date