


2007 FOR PROFIT CORPORATE ANNUAL REPORT


FILED
Apr 26, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000005964
 1. Entity Name
ACE PROCESS SERVICE, INC.



| | |
|---|--|
| Principal Place of Business 20 E WASHINGTON ST STE B QUINCY, FL 32351 | Mailing Address POB 345 MIDWAY, FL 32343 |
|---|--|

DO NOT WRITE IN THIS SPACE



01252007 No Chg-P CR2E034 (11/05)

| | |
|---|---------------------------------------|
| 4. FEI Number 55-0889029 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

**ZINK, KENNETH G
 28325 BLUE STAR HIGHWAY
 HAVANA, FL 32333**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PSTD ZINK, KENNETH G 28325 BLUE STAR HIGHWAY HAVANA, FL 32333 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD ZINK, SUZAN L 28325 BLUE STAR HIGHWAY HAVANA, FL 32333 |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kenneth G. Zink, P/STD* **4/25/07 850-875-7993**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #