## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000120959

Entity Name: ACARTE' TECHNOLOGY SERVICES, INC.

FILED Jan 16, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2271 MCGREGOR BLVD FORT MYERS,, FL 33901 US 2271 MCGREGOR BLVD FORT MYERS, FL 33901

Current Mailing Address: New Mailing Address:

2271 MCGREGOR BLVD 2271 MCGREGOR BLVD FORT MYERS, FL 33901 US FORT MYERS, FL 33901 US

FEI Number: 20-5677232 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:

HOLMLUND, THOMAS R
26 S.E. 10TH AVE
CAPE CORAL, FL 33990 US

HOLMLUND, THOMAS R
2271 MCGREGOR BLVD
FORT MYERS, FL 33901 US

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: THOMAS R. HOLMLUND 01/16/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

 Name:
 KOESTER, JUSTUS
 Name:
 KOESTER, JUSTUS

 Address:
 404 ANCHOR WAY
 Address:
 PO DRAWER 2800

City-St-Zip: FORT MYERS, FL 33903 US City-St-Zip: FORT MYERS, FL 33902 US

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition
Name: HOLMI UND, THOMAS R
Name: HOLMI UND, THOMAS R

Name:HOLMLUND, THOMAS RName:HOLMLUND, THOMAS RAddress:26 SE 10TH AVEAddress:PO DRAWER 2800

City-St-Zip: CAPE CORAL, FL 33990 US City-St-Zip: FORT MYERS, FL 33902 US

Name: HOLMLUND, THOMAS R
Address: 26 SE 10TH AVE
Name: HOLMLUND, THOMAS R
Address: PO DRAWER 2800

City-St-Zip: CAPE CORAL, FL 33990 US City-St-Zip: FORT MYERS, FL 33902 US

Title: S () Delete Title: S (X) Change () Addition

Name: HOLMLUND, THOMAS R
Address: 26 SE 10TH AVE

Name: HOLMLUND, THOMAS R
Address: PO DRAWER 2800

City-St-Zip: CAPE CORAL, FL 33990 US City-St-Zip: FORT MYERS, FL 33902 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JUSTUS KOESTER P 01/16/2007