2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2008
Secretary of State

DOCUMENT# P07000040442

Entity Name: AUTOMATION CONCEPTS & TECHNOLOGIES, INC.

Current Principal Place of Business:

1701 NE 42ND AVENUE, SUITE 301
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 353
OCALA, FL 34478

New Mailing Address:

FEI Number: 26-1433512 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIMONS, JOHN S
121 NW THIRD STREET
OCALA, FL 34475 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:	MACAFFERTY, BRIAN F	
Address:	P.O. BOX 353	
City-St-Zip:	OCALA, FL 34478	
Title:	D	( ) Delete
Name:	MCCAFFERTY, DEBRA A	
Address:	P.O. BOX 353	
City-St-Zip:	OCALA, FL 34478	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: DEBRA A MCCAFFERTY PRES 04/13/2008

Electronic Signature of Signing Officer or Director Date