

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000079592

Entity Name: ACA MANAGEMENT, INC.

**FILED**  
**Mar 24, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

701 US HIGHWAY ONE  
402  
NORTH PALM BEACH, FL 33408 US

**New Principal Place of Business:**

**Current Mailing Address:**

701 US HIGHWAY ONE  
402  
NORTH PALM BEACH, FL 33408 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

SMITH, LAWRENCE W  
701 US HIGHWAY ONE  
402  
NORTH PALM BEACH, FL 33408 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ROSATTI, JOHN  
Address: 701 US HIGHWAY ONE #402  
City-St-Zip: NORTH PALM BEACH, FL 33408 US

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: JOHN ROSATTI

P

03/24/2011

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

\_\_\_\_\_  
Date