

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000023755

**FILED**  
**Mar 27, 2012**  
**Secretary of State**

**Entity Name:** ATLANTIC COAST ELEVATOR SERVICES, INC.

**Current Principal Place of Business:**

500 EAST COURT STREET  
BUNNELL, FL 32110

**New Principal Place of Business:**

4 OFFICE PARK PLACE  
SUITE 230  
PALM COAST, FL 32137 UN

**Current Mailing Address:**

7 LANCASTER LANE  
PALM COAST, FL 32137

**New Mailing Address:**

4 OFFICE PARK PLACE  
SUITE 230  
PALM COAST, FL 32137 UN

**FEI Number:** 45-1555832

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAVIS, CHARLES K  
7 LANCASTER LANE  
PALM COAST, FL 32137 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: PTD  
Name: DAVIS, CHARLES K  
Address: 7 LANCASTER LANE  
City-St-Zip: PALM COAST, FL 32137

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: CHARLES DAVIS

PTD

03/27/2012

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

\_\_\_\_\_  
Date