


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90372 005 ***150.00

DOCUMENT # P15866 1. Entity Name ACS ENTERPRISE SOLUTIONS, INC.	
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Principal Place of Business 2828 N. HASKELL AVE., BLDG. 1, FL-10 DALLAS, TX 75204	Mailing Address 2828 N. HASKELL AVE., BLDG. 1, FL-10 DALLAS, TX 75204
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14004637



2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip
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04062004 Chg-P CR2E034 (10/03)

4. FEI Number 75-2179860	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD DECKELMAN, WILLIAM L JR. 2828 N. HASKELL AVE., BLDG. 1, FL-10 DALLAS, TX 75204 <input type="checkbox"/> Delete	TITLE <input checked="" type="checkbox"/> V NAME STREET ADDRESS CITY-ST-ZIP	V David Jarrett 2828 N. Haskell, Bldg. 1, FL-10 Dallas, TX 75204 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROPHY, DANIEL M 300 FRANK W. BURR BLVD. TEANECK, NJ 07666 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RICH, JEFFREY A 2828 N. HASKELL AVE., BLDG. 1, FL-10 DALLAS, TX 75204 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS LEWIS, WAYNE R 2828 N. HASKELL AVE., BLDG. 1, FL-10 DALLAS, TX 75204 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V REXFORD, JOHN 2828 N. HASKELL AVE., BLDG. 1, FL-10 DALLAS, TX 75204 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T VINEYARD, NANCY P 3988 N. CENTRAL EXPY., FL-9 DALLAS, TX 75204 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Wayne R. Lewis 4/6/04 214-841-6111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
Wayne R. Lewis, Assistant Secretary