



# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 07, 2005 8:00 am**  
**Secretary of State**

02-07-2005 90102 006 \*\*\*150.00

<b>DOCUMENT # P34054</b> 1. Entity Name <b>AMERICAN COLOR GRAPHICS, INC. (NEW YORK)</b>					
Principal Place of Business <b>456 MAIN STREET RIDGEFIELD, CT 06877 US</b>				Mailing Address <b>100 WINNERS CIRCLE BRENTWOOD, TN 37027</b>	
2. Principal Place of Business <b>100 WINNERS CIRCLE</b>		3. Mailing Address <b>BRENTWOOD, TN</b>			
Suite, Apt. #, etc. <b>BRENTWOOD, TN</b>		Suite, Apt. #, etc. 		01262005 Chg-P CR2E034 (10/03)	
City & State 		City & State 		4. FEI Number <b>16-1003976</b>	
Zip <b>37027</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent <b>CT. CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>FRY, ERIC T.</b> <b>1221 AVE OF THE AMERICAS 33RD FL</b> <b>NEW YORK, NY</b> <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	<b>D</b> <b>GUTSTEIN, JONATHAN</b> <b>1221 AVE OF THE AMERICAS 33RD FLOOR</b> <b>NEW YORK, NY 10020</b> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>CHUNG, HWAN-YOON</b> <b>1221 AVE OF THE AMERICAS 33rd FLOOR</b> <b>NEW YORK, NY 10020</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>HOFFMAN, MICHAEL</b> <b>1221 AVE OF THE AMERICAS 33RD FLOOR</b> <b>NEW YORK, NY 10020</b> <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	<b>CPD</b> <b>STEPHEN M DYOTT</b> <b>456 MAIN STREET</b> <b>RIDGEFIELD, CT 06877</b> <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	<b>V</b> <b>ROYCE, DENISE D</b> <b>100 WINNERS CIRCLE</b> <b>BRENTWOOD, TN</b> <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	<b>S</b> <b>DAVIS, TIMOTHY M.</b> <b>456 MAIN STREET</b> <b>RIDGEFIELD, CT 06877</b> <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: <u>Denise Royce</u> <b>DENISE ROYCE</b> 1/27/05 615-377-0377 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					