

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # P34054

1. Entity Name
AMERICAN COLOR GRAPHICS, INC. (NEW YORK)



Principal Place of Business

**100 WINNERS CIRCLE
BRENTWOOD, TN 37027 US**

Mailing Address

**100 WINNERS CIRCLE
BRENTWOOD, TN 37027**



04242007 No Chg-P CR2E034 (11/05)

4. FEI Number
16-1003976

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	FRY, ERIC T.
STREET ADDRESS	1221 AVE OF THE AMERICAS 33RD FL
CITY - ST - ZIP	NEW YORK, NY
TITLE	D
NAME	CHUNG, HWAN-YOON
STREET ADDRESS	1221 AVE OF THE AMERICAS 33RD FLOOR
CITY - ST - ZIP	NEW YORK, NY 10020
TITLE	D
NAME	HOFFMAN, MICHAEL
STREET ADDRESS	1221 AVE OF THE AMERICAS 33RD FLOOR
CITY - ST - ZIP	NEW YORK, NY 10020
TITLE	CPD
NAME	STEPHEN M DYOTT
STREET ADDRESS	456 MAIN STREET
CITY - ST - ZIP	RIDGEFIELD, CT 06877
TITLE	V
NAME	ROYCE, DENISE D
STREET ADDRESS	100 WINNERS CIRCLE
CITY - ST - ZIP	BRENTWOOD, TN
TITLE	S
NAME	KELICK, PATRICK W
STREET ADDRESS	100 WINNERS CIR
CITY - ST - ZIP	BRENTWOOD, TN 37027

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05/17/07-80081-017 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/07

Date

015-377-0377

Daytime Phone #