

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000001508

Entity Name: ACST, INC.

FILED
Jan 21, 2004
Secretary of State

Current Principal Place of Business:

12527-B FRONT BEACH RD.
PANAMA CITY, FL 32407 US

New Principal Place of Business:

Current Mailing Address:

12527-B FRONT BEACH RD.
PANAMA CITY, FL 32407 US

New Mailing Address:

FEI Number: 59-3222929

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARMSTRONG, LARRY
12527-B FRONT BEACH RD
PANAMA CITY BEACH, FL 32407 US

Name and Address of New Registered Agent:

ARMSTRONG, LARRY
12527-B FRONT BEACH RD
PANAMA CITY BEACH, FL 32407 US

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: LARRY ARMSTRONG

01/21/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILSON, CHRIS
Address: 4890 HIGHWAY 51
City-St-Zip: ARITON, AL 36311 US

Title: P () Delete
Name: ARMSTRONG, AMY
Address: 518 BUNKERS COVE RD
City-St-Zip: PANAMA CITY, FL 32401

Title: P () Delete
Name: MCORMICK, AMY
Address: 7019 N LAGOON DR
City-St-Zip: PANAMA CITY BCH, FL 32408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: CHRIS WILSON

P

01/21/2004

Electronic Signature of Signing Officer or Director

Date