## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000017681

Entity Name: AMC ACQUISITION, INC.

FILED Apr 06, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 8100 NATIONS WAY JACKSONVILLE, FL 32256 LIS **Current Mailing Address: New Mailing Address:** 8100 NATIONS WAY JACKSONVILLE, FL 32256 US FEI Number: 59-3236296 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition NEWTON, RUSSEL B JR Name: Name: 111 RIVERSIDE AVE., SUITE 140 Address: Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: Title: Title: () Delete () Change () Addition Name: HICKS, DAVID M. Name: 1725 MEMORIAL PARK DRIVE Address: Address: JACKSONVILLE, FL 32204 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition COMMANDER, CHARLES E III Name: Name: 200 LAURA ST Address: Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: Title: ( ) Delete Title: () Change () Addition SHIRCLIFF, ROBERT T. Name: Name: Address: 1301 RIVER PLACE BLVD., SUITE 2529 Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: Title: PD Title: () Delete PD (X) Change  $\ (\ )$  Addition MEEK, GARY A Name: MEEKS, GARY A Name: 8100 NATIONS WAY Address: 8100 NATIONS WAY Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32256 Title: VPD ( ) Delete Title: () Change () Addition CLEMENTS, ROBERT M Name: Name: Address: 8100 NATIONS WAY Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: THOMAS A. HAJDA SEC 04/06/2007