

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000008438

Entity Name: ACON CONSTRUCTION CO., INC.

FILED  
Feb 26, 2008  
Secretary of State

**Current Principal Place of Business:**

3653 REGENT BOULEVARD  
SUITE 401  
JACKSONVILLE, FL 32224 US

**New Principal Place of Business:**

3653 REGENT BOULEVARD  
SUITE 401  
JACKSONVILLE, FL 32224 US

**Current Mailing Address:****New Mailing Address:**

FEI Number: 59-3296336      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

TULLIS, GARY B PA  
8825 PERIMETER PARK BLVD.  
SUITE 102  
JACKSONVILLE, FL 32216 US

**Name and Address of New Registered Agent:**

TULLIS, GARY B PA  
8709 HUNTERS CREEK DR. SOUTH  
JACKSONVILLE, FL 32256 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:

02/26/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).****OFFICERS AND DIRECTORS:**

Title: DVT ( ) Delete  
Name: SYPNIEWSKI, MARIANNE  
Address: 177 PLANTATION CIR S  
City-St-Zip: PONTE VEDRA BCH, FL 32082

Title: DPS ( ) Delete  
Name: SYPNIEWSKI, DAVID  
Address: 177 PLANTATION CIR S  
City-St-Zip: PONTE VEDRA BCH, FL 32082

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: DAVID SYPNIEWSKI

DPS

02/26/2008

Electronic Signature of Signing Officer or Director

Date