

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000033314

Entity Name: BTS ACRO, INC.

FILED  
May 05, 2008  
Secretary of State

**Current Principal Place of Business:**

11079 TRADEWINDS BOULEVARD  
LARGO, FL 33773

**New Principal Place of Business:**

11079 TRADEWINDS BOULEVARD  
LARGO, FL 33773 US

**Current Mailing Address:**

11079 TRADEWINDS BOULEVARD  
LARGO, FL 33773

**New Mailing Address:**

11079 TRADEWINDS BOULEVARD  
LARGO, FL 33773 US

FEI Number: 59-3375417

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COX, MASON  
11079 TRADEWINDS BLVD  
LARGO, FL 33773 US

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

COX, MASON  
11079 TRADEWINDS BOULEVARD  
LARGO, FL 33773 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: MASON COX

05/05/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PVSD ( ) Delete  
Name: COX, MASON  
Address: 11079 TRADEWINDS BOULEVARD  
City-St-Zip: LARGO, FL 34643

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

Title: PSTD (X) Change ( ) Addition  
Name: COX, MASON  
Address: 11079 TRADEWINDS BOULEVARD  
City-St-Zip: LARGO, FL 34643 US

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: MASON COX

PSTD

05/05/2008

Electronic Signature of Signing Officer or Director

Date