


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90443 020 ***150.00

DOCUMENT # P97000100189	
1. Entity Name ACORN INVESTMENTS AND DEVELOPMENT, INC.	

Principal Place of Business 131 PARK LAKE STREET ORLANDO, FL 32803	Mailing Address 131 PARK LAKE STREET ORLANDO, FL 32803
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2. Principal Place of Business - No P.O. Box # 801 N. Orange Avenue	3. Mailing Address 801 N. Orange Avenue
Suite, Apt. #, etc. Suite 820	Suite, Apt. #, etc. Suite 820
City & State Orlando, FL	City & State Orlando, FL
Zip 32801-5203	Country USA

40090757



04192007 Chg-P CR2E034 (12/06)

4. FEI Number 59-3500349	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HATCHER, STEPHEN B 315 E. ROBINSON STREET SUITE 600 ORLANDO, FL 32801	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTDC CAHILL, CARL H <input type="checkbox"/> Delete 131 PARK LAKE STREET ORLANDO, FL 32803	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTDC CAHILL, CARL H. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 801 N. Orange Ave., Suite 820 Orlando, FL 32801-5203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTSD CAHILL, G S <input type="checkbox"/> Delete 131 PARK LAKE STREET ORLANDO, FL 32803	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTSD CAHILL, G. S. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 801 N. Orange Ave., Suite 820 Orlando, FL 32801-5203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS FINNE, PAMELLA R <input type="checkbox"/> Delete 131 PARK LAKE STREET ORLANDO, FL 32803	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS FINNE, PAMELLA R. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 801 N. Orange Avenue, Suite 820 Orlando, FL 32801-5203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAHILL, STEPHEN C <input type="checkbox"/> Delete 131 PARK LAKE STREET ORLANDO, FL 32803	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAHILL, STEPHEN C. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 801 N. ORANGE AVENUE, SUITE 820 Orlando, FL 32801-5203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAHILL, DAVID C <input type="checkbox"/> Delete 131 PARK LAKE STREET ORLANDO, FL 32803	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAHILL, DAVID C. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 801 N. Orange Ave., Suite 820 Orlando, FL 32801-5203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAYFIELD, JAMES C <input type="checkbox"/> Delete 131 PARK LAKE STREET ORLANDO, FL 32803	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAYFIELD, JAMES C. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 801 N. Orange Ave., Suite 820 Orlando, FL 32801-5203

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: 	Carl H. Cahill	4/25/07	407-422-5456
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #