


2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P99000009372	
1. Entity Name AMERICAN CAPITAL HOLDINGS, INC.	

FILED
09 FEB -5 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 1016 CLEMMONS STREET SUITE 302 JUPITER, FL 33477	Mailing Address 1016 CLEMMONS STREET SUITE 302 JUPITER, FL 33477
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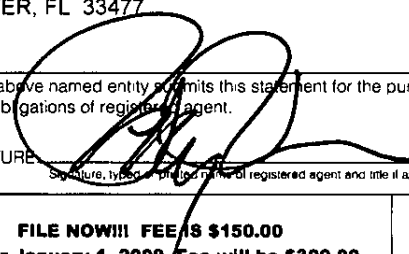
2. Principal Place of Business - No P.O. Box # 601 SEAFARER CIR	3. Mailing Address 601 SEAFARER CIR
Suite, Apt. #, etc. SUITE 402	Suite, Apt. #, etc. SUITE 402

City & State JUPITER, FL	City & State JUPITER, FL
Zip 33477	Country US



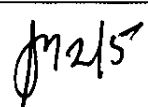
6. Name and Address of Current Registered Agent RICHMOND, BARNEY A 1016 CLEMMONS STREET SUITE 302 JUPITER, FL 33477		7. Name and Address of New Registered Agent Name RICHMOND, BARNEY A Street Address (P.O. Box Number is Not Acceptable) 601 SEAFARER CIR SUITE 402 City JUPITER FL Zip Code 33477	
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8. 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  **BARNEY A RICHMOND** DATE **12/19/2008**

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After January 1, 2009, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPSD RICHMOND, BARNEY A 1016 CLEMMONS ST. SUITE 302 JUPITER, FL 33477 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPSD RICHMOND, BARNEY A 601 SEAFARER CIR. SUITE 402 JUPITER, FL 33477 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TURNER, RICHARD C 4200 OAK STREET PALM BEACH GARDENS, FL 33418 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	800142890218 02/05/09--01009--018 **2100.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: 	BARNEY A RICHMOND - President	12/19/2008	561-429-8704
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	<small>Daytime Phone #</small>