

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S43542

Entity Name: ACKURITLABS, INC.

FILED
Jan 23, 2007
Secretary of State

Current Principal Place of Business:

3345 N. MONROE ST.
SUITE B
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

3345 N. MONROE ST.
SUITE B
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 59-3058433

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACKER, TODD J.
3345 N. MONROE ST.
SUITE B
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: ACKER, MARY ANN,
Address: 2265 MINNEOLA ROAD
City-St-Zip: CLEARWATER, FL

Title: DPTS () Delete
Name: ACKER, TODD J.,
Address: 162 FISHER CREEK DR
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: V () Delete
Name: HOLM, STEPHEN
Address: 2322 MCWEST ST
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: ACKER, JAMES R
Address: 2265 MINNEOLA RD
City-St-Zip: CLEARWATER, FL 33764

Title: D () Delete
Name: ACKER, KATHI
Address: 162 FISHER CREEK DRIVE
City-St-Zip: CRAWFORDVILLE, FL 32327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ACKER, MARY ANN,
Address: 8750 NW HWY 225A
City-St-Zip: OCALA, FL 34482

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ACKER, JAMES R
Address: 8750 NW HWY 225A
City-St-Zip: OCALA, FL 34482

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TODD J. ACKER

PRES

01/23/2007

Electronic Signature of Signing Officer or Director

Date