

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000081479

**Entity Name:** AMERICAN CLASSIC AGENCY, CORP.

**Current Principal Place of Business:**

201 ATP TOUR BLVD  
PONTE VEDRA BEACH, FL 32082

**Current Mailing Address:**

201 ATP TOUR BLVD  
PONTE VEDRA BEACH, FL 32082

**FEI Number: 59-3756248**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
C/O C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD  
PLANTATION, FL 33324-2845 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PCEO  
Name POLICASTRO, GERALD  
Address 201 ATP TOUR BLVD,  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title VCFO  
Name SIELICKI, RICHARD  
Address 201 ATP TOUR BLVD,  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title S  
Name BOST, KELLEY  
Address 201 ATP TOUR BLVD  
City-State-Zip: PONTE VEDRA BEACH FL 32082

*I hereby 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 all other like empowered.*

**SIGNATURE: KELLEY BOST**

**CORP SECRETARY**

**03/31/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date