

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K95198

FILED
May 01, 2010
Secretary of State

Entity Name: THE ALLMAN BROTHERS BAND, INC.

Current Principal Place of Business:

% CITRIN COOPERMAN & COMPANY
529 FIFTH AVE.
NEW YORK, NY 10017 US

New Principal Place of Business:

Current Mailing Address:

% CITRIN COOPERMAN & COMPANY
529 FIFTH AVE.
NEW YORK, NY 10017 US

New Mailing Address:

FEI Number: 59-2950856 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1204 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 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

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: P
Name: BETTS, FORREST R
Address: C/O M. MOSCA, 100 WALLACE AVENUE, STE 380
City-St-Zip: SARASOTA, FL 34237

Title: ST
Name: TRUCKS, CLAUDE H JR.
Address: C/O KEN GORDON 2400 PGA BLVD SUITE 4
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: V
Name: ALLMAN, GREGORY L
Address: C/O LEHMAN & LEHMAN, 343 MILLBURN AVE, 200
City-St-Zip: MILLBURN, NJ 07041

Title: V
Name: JAIMOE
Address: 533 COTTAGE GROVE ROAD
City-St-Zip: BLOOMFIELD, CT 06002

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: GREGORY ALLMAN

VP

05/01/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date