

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000031149

FILED
Apr 15, 2010
Secretary of State

Entity Name: ALPHA MANAGEMENT ADMINISTRATION CORP.

Current Principal Place of Business:

230 SUNPORT LANE
STE 100
ORLANDO, FL 32829 US

New Principal Place of Business:

Current Mailing Address:

230 SUNPORT LANE
OFFICE 100
ORLANDO, FL 32829 US

New Mailing Address:

FEI Number: 65-0408992 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BETHENCOURT, MARIA E
8559 LAKE WINDHAM AVE
ORLANDO, FL 32829 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: PS
Name: BETHENCOURT, MARIA E
Address: 8559 LAKE WINDHAM AVE
City-St-Zip: ORLANDO, FL 32829

Title: VT
Name: BETHENCOURT, ROBERT J
Address: 8559 LAKE WINDHAM AVE
City-St-Zip: ORELANDO, FL 32829

Title: VP
Name: BETHENCOURT, CAROLINE F
Address: 8559 LAKE WINDHAM AVE
City-St-Zip: ORLANDO, FL 32829

Title: VP
Name: BETHENCOURT, ROBERT J
Address: 8559 LAKER WINDHAM AVE
City-St-Zip: ORLANDO, 32

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: ROBERT J BETHENCOURT

VP

04/15/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date