## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 388959** 

Title:

Name:

Address: City-St-Zip:

Entity Name: ALPHA - MEDICAL LAND CORPORATION

Apr 24, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1301 6TH AVE WEST **STE 600** BRADENTON, FL 34205 **Current Mailing Address: New Mailing Address:** 1301 6TH AVE WEST STE 600 BRADENTON, FL 34205 US FEI Number: 59-1413082 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STATHIS, STAM W CPA 1301 6TH AVE W STE 600 BRADENTON, FL 34205 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition MEYER, ROGER A Name: Name: MEYER, ROGER A 7816 DE SOTO MEMB BLVD 1301 SIXTH AVE. WEST, #600 Address: Address: City-St-Zip: BRADENTON FL City-St-Zip: BRADENTON, FL 34205 Title: Title: ( ) Delete (X) Change ( ) Addition Name: LIEBERMAN, LAWRENCE J. Name: LIEBERMAN, LAWRENCE J. 2010 59TH ST. W., #1700 315 - 75TH STREET WEST Address: Address: BRADENTON, FL 34200 City-St-Zip: BRADENTON, FL City-St-Zip: (X) Change ( ) Addition Title: ( ) Delete Title: LINTON, WILLIAM R JR LINTON, WILLIAM R JR Name: Name: 1301 SIXTH AVE. WEST, #600 1803 71ST ST NW Address: Address: City-St-Zip: BRADENTON, FL 34209 City-St-Zip: BRADENTON, FL 34205 Title: **VPST** ( ) Delete Title: **VPST** (X) Change ( ) Addition BLACKWOOD, ROBERT MD BLACKWOOD, ROBERT MD Name: Name: Address: 2004 79 ST NW Address: 7005 CORTEZ ROAD WEST City-St-Zip: BRADENTON, FL City-St-Zip: BRADENTON, FL 34209

I hereby certify that the information supplied with this filing does not qualify 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.

Title:

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: LAWRENCE J. LIEBERMAN 04/24/2009

() Delete

FRANKEL, JACK MD

3311 BAYOU SOUND

LONGBOAT KEY, FL

(X) Change ( ) Addition

FRANKEL, JACK MD

BRADENTON, FL 34205

1301 SIXTH AVE. WEST. #600