

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000011643

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** ALBA MARIN MUIRHEAD, P.A.

**Current Principal Place of Business:**

9869 SAVANNAH ESTATES DRIVE  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

**Current Mailing Address:**

9869 SAVANNAH ESTATES DRIVE  
LAKE WORTH, FL 33467

**New Mailing Address:**

FEI Number: 20-8307468

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MUIRHEAD, ALBA M  
9869 SAVANNAH ESTATES DRIVE  
LAKE WORTH, FL 33467 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: PRES  
Name: MUIRHEAD, ALBA M  
Address: 9869 SAVANNAH ESTATES DRIVE  
City-St-Zip: LAKE WORTH, FL 33467

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: ALBA M. MUIRHEAD

PRES

04/30/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date