

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000039726

**Entity Name:** DISTRIBUTION ALTERNATIVES, INC.

**Current Principal Place of Business:**

701 RETREAT DR  
UNIT 339  
NAPLES, FL 34110

**Current Mailing Address:**

701 RETREAT DR  
UNIT 339  
NAPLES, FL 34110 US

**FEI Number: 11-3003621**

**Certificate of Status Desired: No**

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

KELLY, CHARLES MCPA  
2390 TAMiami TRAIL NORTH  
SUITE 204  
NAPLES, FL 34103 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            CEO  
Name            WINSTON, LAWRENCE J  
Address        701 RETREAT DR  
                  UNIT 339  
City-State-Zip: NAPLES FL 34110

*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: LAWRENCE J. WINSTON**

**CEO**

**01/29/2023**

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

\_\_\_\_\_  
Date