

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000001919

**Entity Name:** ALDEN BAILEY RESTORATION CORP.

**Current Principal Place of Business:**

13506 SUMMERPORT VILLAGE PARKWAY  
STE 303  
WINDERMERE, FL 34786

**Current Mailing Address:**

13506 SUMMERPORT VILLAGE PARKWAY  
STE 303  
WINDERMERE, FL 34786

**FEI Number:** 46-4501067

**Certificate of Status Desired:** Yes

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

BUSINESS FILINGS INCORPORATED  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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            DIR.  
Name           CROOKER, JACQUELINE  
Address        54 DANBURG ROAD #290  
City-State-Zip: RIDGEFIELD CT 06877

Title            CEO  
Name           CROOKER, GLENN SR.  
Address        54 DANBURY ROAD #290  
City-State-Zip: RIDGEFIELD CT 06877

*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:** GLENN CROOKER SR

CEO

03/12/2018

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

\_\_\_\_\_  
Date