Electronic Signature of Signing Officer/Director Detail

#### 2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P2000080473

Entity Name: ALBANS SOUTH CORPORATION

### **Current Principal Place of Business:**

3225 MCLEOD DRIVE SUITE 100 LAS VEGAS, NV 89121

#### **Current Mailing Address:**

3225 MCLEOD DRIVE SUITE 100 LAS VEGAS, NV 89121 US

#### FEI Number: 85-3335869

## Name and Address of Current Registered Agent:

ANDERSON REGISTERED AGENTS, INC. 625 E.TWIGGS STREET SUITE 110 TAMPA, FL 33602 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

#### **Officer/Director Detail :**

Title	PSD	Title	VPTD
Name	COCHRANE, RYNITA E	Name	COCHRANE, JAMAL A
Address	3225 MCLEOD DRIVE, SUITE 100	Address	3225 MCLEOD DRIVE, SUITE 100
City-State-Zip:	LAS VEGAS NV 89121	City-State-Zip:	LAS VEGAS NV 89121

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: RYNITA E. COCHRANE

Date

Date

FILED Apr 27, 2022 Secretary of State 6357649914CC

Certificate of Status Desired: No

PRESIDENT

04/27/2022