

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000094407

**Entity Name:** THE KASTER ALLIANCE, INCORPORATED

**Current Principal Place of Business:**

4305 NW 67 WAY  
CORAL SPRINGS, FL 33067

**Current Mailing Address:**

4305 NW 67 WAY  
CORAL SPRINGS, FL 33067

**FEI Number:** 65-0728793

**Certificate of Status Desired:** No

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

SHOWERS, L. NORMAN  
4305 NW 67 WAY  
CORAL SPRINGS, FL 33067 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 P  
Name SHOWERS, L. NORMAN  
Address 4305 NW 67 WAY  
City-State-Zip: CORAL SPRINGS FL 33067

Title S  
Name SHOWERS, LEE N  
Address 3488 HAMLIN SQUARE, SW  
City-State-Zip: ATLANTA GA 30331

Title T  
Name CROOMS, JOSEPH B  
Address 9360 DELFT WAY  
City-State-Zip: ALPHARETTA GA 30202

*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:** L. NORMAN SHOWERS

PRESIDE T

04/16/2013

Electronic Signature of Signing Officer/Director Detail

Date