

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025597

Entity Name: ALPHA MANAGEMENT LLC

Current Principal Place of Business:

3539 TUSCANY RESERVE BLVD
NEW SMYRNA BEACH, FL 32168

Current Mailing Address:

3539 TUSCANY RESERVE BLVD
NEW SMYRNA BEACH, FL 32168

FEI Number: 20-0698076

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOYER, SHARON A
3539 TUSCANY RESERVE BLVD
NEW SMYRNA BEACH, FL 32168 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

Authorized Person(s) Detail :

Title PRES
Name BOYER, SHARON A
Address 3539 TUSCANY RESERVE
City-State-Zip: NEW SMYRNA BEACH FL 32168

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHARON A. BOYER

OWNER

01/12/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date