

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 674474

FILED  
May 14, 2009  
Secretary of State

Entity Name: THE ALPINE SEVEN COMPANY, INC.

**Current Principal Place of Business:**

1112 N FED HWY  
BOYNTON BEACH, FL 33435

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 700  
BOYNTON BEACH, FL 334250700

**New Mailing Address:**

FEI Number: 34-1125988

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

POWELL, MARDY  
1112 N FED HWY  
BOYNTON, FL 33435 US

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

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: POWELL, MARDY  
Address: 1112 N FED HWY  
City-St-Zip: BOYNTON BEACH, FL

Title: D ( ) Delete  
Name: POWELL, LLOYD  
Address: 1112 N. FEDERAL HWY  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D ( ) Delete  
Name: POWELL, KENT L  
Address: 8238 WINSTEAD PL 203  
City-St-Zip: MANASSAS, VA 20109

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LLOYD POWELL

D

05/14/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date