

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2007 8:00 am
Secretary of State

03-15-2007 90027 032 ****61.25

DOCUMENT # 727860

1. Entity Name
THE LADY ALEXANDER ASSOCIATION, INC.



Principal Place of Business
**1505 SOMBRERO BOULEVARD
MARATHON, FL 33050 US**

Mailing Address
**5800 OVERSEAS HWY.
SUITE 6
MARATHON, FL 33050 US**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01232007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-1645469

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CUNNINGHAM, RALPH E., JR.
2975 OVERSEAS HIGHWAY
MARATHON, FL**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **VP** ☐ Delete
NAME **COX, JIM**
STREET ADDRESS **1909 RISTIC DRIVE**
CITY-ST-ZIP **CASPER, WY 82609**

TITLE **TD** ☐ Delete
NAME **GORMAN, TOM**
STREET ADDRESS **1505 SOMBRERO BLVD #303**
CITY-ST-ZIP **MARATHON, FL**

TITLE **DP** ☒ Delete
NAME **SPITZIG, HENRY**
STREET ADDRESS **1505 SOMBRERO BLVD 203**
CITY-ST-ZIP **MARATHON, FL 33050**

TITLE **DVP** ☒ Delete
NAME **HAGUE, ALLEN**
STREET ADDRESS **1505 SOMBRERO BOULEVARD SUITE 3**
CITY-ST-ZIP **MARATHON, FL 33050**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Change ☐ Addition
NAME **Jim Cox**
STREET ADDRESS
CITY-ST-ZIP

TITLE **VPD** ☒ Change ☐ Addition
NAME **Tom Gorman**
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☐ Change ☒ Addition
NAME **Edward Thammen**
STREET ADDRESS **1805 Notre Dame Ave**
CITY-ST-ZIP **Kathleville MO 61043**

TITLE **TD** ☐ Change ☐ Addition
NAME **Dale Denning**
STREET ADDRESS **1509 Sombrero Blvd**
CITY-ST-ZIP **401 Atlantic Ave #1204**

TITLE ☐ Change ☒ Addition
NAME **Virginia Beach, VA 23451**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME **Marilyn Tempert**
STREET ADDRESS **900 Corte Del Sol**
CITY-ST-ZIP **Marathon FL 33050**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James Cox

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/6/07

Date

3057434599

Daytime Phone #