2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 10, 2007 8:00 am Secretary of State

ANNUAL RE	PORI

DOCUMENT # 752936 1. Entity Name THE ALABAMA MANAGEMENT, INC.				0	1-10-2007	90045 015 ****6	1.25		
Principal Place of Business 1600 - 1700 ALABAMA DR. WINTER PARK, FL 32789 US Mailing Address 631 W FAIRBANKS AVE. WINTER PARK, FL 32789			JS				nil as d i cada		
Principal Place of Business - No P.O. Box # 3. Mailing Address									
Suite, Apt. #, etc. Suite, Apt. #, etc.				01032007 CI	hg-NP	CR2E037 (12/06)			
City & State City & State			4. FEI Number 59-209546	9	——————————————————————————————————————	oplied For ot Applicable			
Zip	Country	Zip	Zip Country		5. Certificate of St	5. Certificate of Status Desired			
	6. Name and Address of Current	Registered Agent			7. Name and Add	ress of New R	egistered Agent		
EDGAR, VERNON G., JR.			Name						
	IRBANKS AVE., STE. B PARK, FL 32789			Street Address (P.O. Box Number is Not Acceptable)					
				City	City FL Zip Code				
	named entity submits this statement f	or the purpose of changir	ng its register	L ed office or reg	gistered agent, or both, in	the State of Flo		and accept	
the obligat	ions of registered agent.								
SIGNATURE .	Signature, typed or printed name of registered agen	t and title if applicable.	(NOTE: Registere	ed Agent signature re	equired when reinstating)		DATE		
Filing Fee is \$61.25 Due by May 1, 2007 9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees					
10.	OFFICERS AND D	RECTORS	11.		ADDITIONS/CHANG	ES TO OFFICE	RS AND DIRECTORS IN	1 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LYDEN, JAMES 1600 ALABAMA DRIVE WINTER PARK, FL 32789	☐ Delete					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD EDGAR, VERNON 1602 ALABAMA DRIVE WINTER PARK, FL 32789	☐ Delete					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JACOBO, JAKE 1700 ALABAMA DR WINTER PARK, FL 32789	☐ Delete					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SILVERBACH, ROSS 3015 CLEMSON RD ORLANDO, FL 32808	☐ Delete		I .			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		AE FET ADDRESS	D Stiegel, Debb 1600 Alabama Winter Park,	oie Drive FL 3278	☐ Change	X Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with the control of the cont	th this filing does not gua	NAP STF CIT	ME MEET ADDRESS Y-ST-ZIP memptions cont	ained in Chapter 119, Flo	orida Statutes. I	further certify that the i	nformat	

12. I hereby certify that the information supplied with this filling 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: SIGNATURE AND THE DRY SIGNATURE A