

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 16, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # 752936**

1. Entity Name  
**THE ALABAMA MANAGEMENT, INC.**



Principal Place of Business  
**1600 - 1700 ALABAMA DR.  
WINTER PARK, FL 32789 US**

Mailing Address  
**631 W FAIRBANKS AVE.  
WINTER PARK, FL 32789 US**



01042008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2095469**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**EDGAR, VERNON G., JR.  
631 W. FAIRBANKS AVE., STE. B  
WINTER PARK, FL 32789**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	LYDEN, JAMES
STREET ADDRESS	1600 ALABAMA DRIVE
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	TD
NAME	EDGAR, VERNON
STREET ADDRESS	1602 ALABAMA DRIVE
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	P
NAME	JACOBO, JAKE
STREET ADDRESS	1700 ALABAMA DR
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	D
NAME	SILVERBACH, ROSS
STREET ADDRESS	3015 CLEMSON RD
CITY-ST-ZIP	ORLANDO, FL 32808
TITLE	D
NAME	STIEGEL, DEBBIE
STREET ADDRESS	1600 ALABAMA DR
CITY-ST-ZIP	WINTER PARK, FL 32789
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000786694  
01/17/08-80051-010 61.25

**DO NOT WRITE  
IN THIS SPACE**

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:**

**VERNON G. EDGAR JR.**

Date

**407-647-3266**

Daytime Phone #