

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000005101

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** MITCHELL MANAGEMENT OF ALABAMA, INC.

**Current Principal Place of Business:**

758 ST. MICHAEL ST.  
SUITE D  
MOBILE, AL 36602

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 16506  
MOBILE, AL 366161506

**New Mailing Address:**

**FEI Number:** 20-4617516

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GUTTMANN, STEPHEN M ATTN:  
314 S BAYLEN STREET  
#203  
PENSACOLA, FL 32502 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** CEO  
**Name:** COFFEY, PATRICK J  
**Address:** P.O. BOX 16506  
**City-St-Zip:** MOBILE, AL 36616 05

**Title:** D  
**Name:** COFFEY, PATRICK J  
**Address:** P.O. BOX 16506  
**City-St-Zip:** MOBILE, AL 366161506

**Title:** S  
**Name:** FARMER, KIM  
**Address:** P.O. BOX 16506  
**City-St-Zip:** MOBILE, AL 366161506

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 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 all other like empowered.

**SIGNATURE:** PATRICK J. COFFEY

CEO

03/30/2010

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

\_\_\_\_\_  
Date