

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G23080

FILED
Mar 24, 2009
Secretary of State

Entity Name: ALEXANDER'S HOUSE OF BARBECUE, INC.

Current Principal Place of Business:

503 PALMETTO STREET
EUSTIS, FL 32726 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1905
EUSTIS, FL 327271905 US

New Mailing Address:

FEI Number: 59-2263600

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILTS C. ALEXANDER, III
503 PALMETTO STREET
EUSTIS, FL 32726 US

Name and Address of New Registered Agent:

ALEXANDER, WILTS C III
503 PALMETTO STREET
EUSTIS, FL 32726 US

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: WILTS C. ALEXANDER III

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: ALEXANDER, WILTS C III
Address: 503 PALMETTO STREET
City-St-Zip: EUSTIS, FL 32726

Title: DP () Delete
Name: ALEXANDER, MARY ANN
Address: 503 PALMETTO STREET
City-St-Zip: EUSTIS, FL 32726

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: WILTS C. ALEXANDER III

DVP

03/24/2009

Electronic Signature of Signing Officer or Director

Date