

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J48818

FILED
Apr 28, 2009
Secretary of State

Entity Name: ALFIE DEVELOPMENT CORP.

Current Principal Place of Business:

400 S AUSTRALIAN AVENUE
SUITE #300
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

400 S AUSTRALIAN AVENUE
SUITE #300
WEST PALM BEACH, FL 33401 US

New Mailing Address:

FEI Number: 59-2761125 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOEPEL, JOEL P.
400 S AUSTRALIAN AVENUE
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

KOEPEL, JOEL P.
400 S AUSTRALIAN AVENUE #300
WEST PALM BEACH, FL 33401 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: _____ 04/28/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: JOEL P. KOEPEL
Address: 400 S AUSTRALIAN AVENUE
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: JOEL P. KOEPEL
Address: 400 S AUSTRALIAN AVENUE #300
City-St-Zip: WEST PALM BEACH, FL 33401

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: JOEL P. KOEPEL DP 04/28/2009
Electronic Signature of Signing Officer or Director Date