

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000045003

Entity Name: ALTER LLC

FILED
Jan 29, 2009
Secretary of State

Current Principal Place of Business:

13785 WALSINGHAM RD
#413
LARGO, FL 33774

New Principal Place of Business:

Current Mailing Address:

13785 WALSINGHAM RD
#413
LARGO, FL 33774

New Mailing Address:

FEI Number: 55-0896619

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FULD, RON
11705 MAPLE TREE WAY
TAMPA, FL 33625 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HUNTER, ALAN S
Address: 13785 WALSINGHAM RD #413
City-St-Zip: LARGO, FL 33774

Title: MGRM () Delete
Name: HUNTER, TERRI S
Address: 13785 WALSINGHAM RD #413
City-St-Zip: LARGO, FL 33774

Title: MGRM () Delete
Name: HUNTER, ALAN S
Address: 13785 WALSINGHAM RD #413
City-St-Zip: LARGO, FL 33774

Title: MGR () Delete
Name: KELLEY, PETE
Address: 13785 WALSINGHAM RD #413
City-St-Zip: LARGO, FL 33774

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TERRI HUNTER

SECT

01/29/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date