

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000068728

**FILED**  
**Aug 05, 2011**  
**Secretary of State**

**Entity Name:** ALPHA PROPERTIES & INVESTMENT, LLC.

**Current Principal Place of Business:**

8954 CASTLE ROCK DRIVE  
JACKSONVILLE, FL 32221

**New Principal Place of Business:**

**Current Mailing Address:**

8954 CASTLE ROCK DRIVE  
JACKSONVILLE, FL 32221

**New Mailing Address:**

**FEI Number:** 27-2985617

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POMMELL, TIMOTHY A  
8954 CASTLE ROCK DRIVE  
JACKSONVILLE, FL 32221 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  
Name: POMMELL, TIMOTHY A  
Address: 8954 CASTLE ROCK DRIVE  
City-St-Zip: JACKSONVILLE, FL 32221

Title: MGRM  
Name: SEELY, TAMMY L  
Address: 8954 CASTLE ROCK DRIVE  
City-St-Zip: JACKSONVILLE, FL 32221

Title: MGRM  
Name: HECHT, MITCHELL L  
Address: 8954 CASTLE ROCK DRIVE  
City-St-Zip: JACKSONVILLE, FL 32221

I hereby 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: TIMOTHY A POMMELL

MGR

08/05/2011

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