2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2011
Secretary of State

DOCUMENT# L37386

Entity Name: THE ALISTER GROUP, INC.

Current Principal Place of Business:

1144 LINKSIDE COURT
APOPKA, FL 32712 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4382
APOPKA, FL 32704 US

New Mailing Address:

FEI Number: 59-2980405 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOKINEN, NORMAN M
1258 GREEN VISTA CIRCLE
APOPKA, FL 32712 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

OFFICERS AND DIRECTORS:

Title: PD
Name: JOKINEN, NORMAN M.
Address: 1258 GREEN VISTA CIRCLE
City-St-Zip: APOPKA, FL 32712

Title: TD
Name: HENRICKSON, C
Address: P O BOX 4403
City-St-Zip: APOPKA, FL 32704

Title: D
Name: JONES, F. SHELTON, JR.
Address: 5480 PARK VALE BLVD.
City-St-Zip: WINTER PARK, FL

Title: SD
Name: JOKINEN, JULIE
Address: 1258 GREEN VISTA CIRCLE
City-St-Zip: APOPKA, FL

Title: VD
Name: JORDAN, LEN
Address: P.O. BOX 4382
City-St-Zip: APOPKA, FL 32704

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: C HENRICKSON TD 02/13/2011

Electronic Signature of Signing Officer or Director Date