


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2007 8:00 am
Secretary of State

02-22-2007 90274 013 ****50.00


| | | | |
|--|---|---|---|
| DOCUMENT # M00000000159 1. Entity Name ALEX, L.L.C. | |  | |
| Principal Place of Business C/O BILL WELDEN P.O. BOX 55465 BIRMINGHAM, AL 35255 | | Mailing Address C/O BILL WELDEN P.O. BOX 55465 BIRMINGHAM, AL 35255 | |
| 2. Principal Place of Business - No P.O. Box # <i>Attn: Chuck Welden</i> Suite, Apt. #, etc. 2040 Highland Avenue City & State Birmingham, AL Zip 35205 | | 3. Mailing Address <i>Attn: Chuck Welden</i> Suite, Apt. #, etc. 2040 Highland Avenue City & State Birmingham, AL Zip 35205 | |
| 4. FEI Number 63-1235929 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$5.00 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent LOVELL, STACY 3250 WHISPER LAKE LANE WINTER PARK, FL 32792 | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div> | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | |
| SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ | | | |
| Filing Fee is \$50.00 Due by May 1, 2007 | | Make check payable to Florida Department of State | |
| 9. MANAGING MEMBERS/MANAGERS | | 10. ADDITIONS/CHANGES | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MEM WELDEN, WILLIAM B 1103 R. ARRINGTON, JR. BLVD SO. BIRMINGHAM, AL 35205 | TITLE NAME STREET ADDRESS CITY - ST - ZIP | manager <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | Manager Charles V. Welden, III 2040 Highland Avenue Birmingham, AL 35205 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | Manager Alex E. Halberstadt 1110 West Ivanhoe Blvd. #23 Orlando, FL 32804 <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE | | Date _____ Daytime Phone # 205-930-4520 | |
| Charles V. Welden, III, Managing Member | | | |

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2/22/2007-90274-013-\$50.00-\$50.00

ATTACHMENT

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| SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable | | DATE _____ (NOTE: Registered Agent signature required when reinstating) | |
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| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | Member Charles V. Welden, III 2040 Highland Avenue Birmingham, AL 35205 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
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Charles V. Welden, III