2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005992

FILED Mar 08, 2010 Secretary of State

Entity Name: A LIVING VISION OF ALVA, INC.

Current Principal Place of Business: New Principal Place of Business:

21471 NORTH RIVER RD ATTN EMILY R SMITH ALVA, FL 33920 US

Current Mailing Address: New Mailing Address:

PO BOX 2022 ATTN EMILY R SMITH ALVA, FL 33920 US

FEI Number: 65-1120852 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SMITH, EMILY R
21121 WILD HORSE DR
ALVA, FL 33920 US
SMITH, EMILY R T
21121 WILD HORSE DR
ALVA, FL 33920 US
ALVA, FL 33920 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: EMILY R. SMITH 03/08/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: DANIELS, RUBY J

Address: 18100 PERSIMMON RIDGE RD

City-St-Zip: ALVA, FL 33920 US

Title: V

Name: GERALD, B J Address: 3301 BATEMAN RD City-St-Zip: ALVA, FL 33920 US

Title: S

Name: GREEN, JIM

Address: 14801 PALM BEACH BLVD City-St-Zip: ALVA, FL 33920 US

Title:

Name: ANDRYS, ROB

Address: 23031 TUCKAHOE ROAD City-St-Zip: ALVA, FL 33920 US

Title:

Name: STOTTLEMYER, MICHAEL
Address: 18400 TELEGRAPH CREEK RD

City-St-Zip: ALVA, FL 33920 US

Title:

 Name:
 SMITH, EMILY R

 Address:
 21121 WILD HORSE DR

 City-St-Zip:
 ALVA, FL 33920 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EMILY R. SMITH T 03/08/2010