

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000483

FILED
Jan 15, 2009
Secretary of State

Entity Name: ALPHA-1 FOUNDATION, INC.

Current Principal Place of Business:

2937 S.W. 27 AVE
STE. 302
MIAMI, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

2937 S.W. 27 AVE
STE. 302
MIAMI, FL 33133 US

New Mailing Address:

FEI Number: 65-0585415 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WALSH, JOHN W
2937 S.W. 27TH AVE
STE. 302
MIAMI, FL 33133 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: PCEO () Delete
Name: WALSH, JOHN W
Address: 2937 S.W. 27TH AVE, STE. 302
City-St-Zip: MIAMI, FL 33133

Title: CD () Delete
Name: WITHERS, WAYNE E JR
Address: 10890 NW 29TH ST.
City-St-Zip: MIAMI, FL 33172

Title: VCD () Delete
Name: MARTIN II, WILLIAM J
Address: 111 T.W. ALEXANDER DR, BLDG. 101
City-St-Zip: RESEARCH TRINAGLE PARK, NC 27709

Title: TD () Delete
Name: REES, AB
Address: 810 W. 57TH TERRACE
City-St-Zip: KANSAS CITY, MO 64113

Title: VCFO () Delete
Name: BARRETT, ROBERT C
Address: 2937 SW 27TH AVE., STE 305
City-St-Zip: MIAMI, FL 33133

Title: SD () Delete
Name: WILLIAMS, ROB ESQ
Address: 350 E. BROADWAY
City-St-Zip: JACKSON HOLE, WY 3001

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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

Title: SD (X) Change () Addition
Name: ALFONSO, ELAINE
Address: PMB 318, 2000 ROAD 8177
City-St-Zip: GUAYNABO, PR 00966

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 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 an address, with all other like empowered.

SIGNATURE: JOHN W. WALSH

PCEO

01/15/2009

Electronic Signature of Signing Officer or Director

_____ Date