

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000045205

FILED
Jan 04, 2008
Secretary of State

Entity Name: ALEXANDER COMPANY, CPA'S, P.A.

Current Principal Place of Business:

4285 SW MARTIN HIGHWAY
PALM CITY, FL 34990

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 590
PALM CITY, FL 34991

New Mailing Address:

FEI Number: 11-3685975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALEXANDER, GARY D
4285 SW MARTIN HIGHWAY
PALM CITY, FL 34990 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: ALEXANDER, GARY D
Address: PO BOX 590
City-St-Zip: PALM CITY, FL 34990

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,S (X) Change () Addition
Name: ALEXANDER, GARY D
Address: PO BOX 590
City-St-Zip: PALM CITY, FL 34990

Title: D () Change (X) Addition
Name: ALEXANDER, GARY D
Address: PO BOX 590
City-St-Zip: PALM CITY, FL 34991

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

SIGNATURE: GARY D. ALEXANDER

P

01/04/2008

Electronic Signature of Signing Officer or Director

Date