

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000083627

FILED
Jan 11, 2009
Secretary of State

Entity Name: ALPHA TECHNOLOGY SOLUTIONS, INC.

Current Principal Place of Business:

676 GRAND PARKE DRIVE
JACKSONVILLE, FL 32259

New Principal Place of Business:

450-106 STATE ROAD 13
SUITE 274
ST. JOHNS, FL 32259

Current Mailing Address:

676 GRAND PARKE DRIVE
JACKSONVILLE, FL 32259

New Mailing Address:

450-106 STATE ROAD 13
SUITE 274
ST. JOHNS, FL 32259

FEI Number: 14-1891700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DWIGHT, PRIESTLEY
676 GRAND PARKE DRIVE
JACKSONVILLE, FL 32259 US

Name and Address of New Registered Agent:

DWIGHT, PRIESTLEY
450-106 STATE ROAD 13
SUITE 274
ST. JOHNS, FL 32259 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: DWIGHT PRIESTLEY

01/11/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PRIESTLEY, DWIGHT
Address: 676 GRAND PARKE DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: SVP () Delete
Name: PRIESTLEY, TRUDI-ANN
Address: 676 GRAND PARKE DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PRIESTLEY, DWIGHT
Address: 4509 E. CATBRIER COURT
City-St-Zip: ST. JOHNS, FL 32259

Title: SVP (X) Change () Addition
Name: PRIESTLEY, TRUDI-ANN
Address: 4509 E. CATBRIER COURT
City-St-Zip: ST. JOHNS, FL 32259

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: DWIGHT PRIESTLEY

P

01/11/2009

Electronic Signature of Signing Officer or Director

Date