

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000120160

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Entity Name:** ALPHA FOUNDATION SPECIALISTS, INC.

**Current Principal Place of Business:**

4778-B WOODLANE CIRCLE  
TALLAHASSEE, FL 323303

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 13469  
TALLAHASSEE, FL 32317

**New Mailing Address:**

**FEI Number:** 20-0331582

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHANLEY, MATTHEW S  
1913 WILLOW RUN DR  
TALLAHASSEE, FL 32312 US

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

SHANLEY, MATTHEW S  
11665 GRAZING BUCK CT.  
TALLAHASSEE, FL 32317 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: MATTHEW SHANLEY

04/12/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SHANLEY, MATTHEW S  
Address: 11665 GRAZING BUCK CT.  
City-St-Zip: TALLAHASSEE, FL 32317

Title: S-T  
Name: SHANLEY, NANCY F  
Address: 1913 WILLOW RUN DR.  
City-St-Zip: TALLAHASSEE, FL 32312

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

SIGNATURE: MATTHEW SHANLEY

P

04/12/2012

Electronic Signature of Signing Officer or Director

Date