## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 24, 2008 08:00 A **DOCUMENT # P04000020792 Secretary of State** ALEXANDER T, INC. Principal Place of Business Mailing Address 4873 SW GOLFSIDE DR 4873 SW GOLFSIDE DR PALM CITY, FL 34990 US PALM CITY, FL 34990 03192008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0698055 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent AYDELOTTE, ALEXANDER DO NOT WRITE 4873 SW GOLFSIDE DR PALM CITY, FL 34990 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable. U0000088773A 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 04/08/09-90083-024 150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS TITLE NAME AYDELOTTE, ALEXANDER STREET ADDRESS 4873 SW GOLFSIDE DRIVE CITY-ST-ZIP PALM CITY, FL 34990 TITLE NVAE STREET ADDRESS CITY-ST-ZP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP - TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with SIGNATURE:

FILED