

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000154857

Entity Name: BACK ALLI'S, INC.

**FILED**  
**Jan 15, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1623 LISA AVE  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

1623 LISA AVE  
FERNANDINA BEACH, FL 32034

**New Mailing Address:**

FEI Number: 01-0823890

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEACH, ALLISON C MISS  
1623 LISA AVE  
FERNANDINA BEACH, FL 32034 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: PSTD  
Name: LEACH, ALLISON C  
Address: 1623 LISA AVE  
City-St-Zip: FERNANDINA BEACH, FL 32034

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: ALLISON C LEACH

PSTD

01/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date