## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000162878

Entity Name: ALCU TAX AND ACCOUNTING, INC.

**FILED** Apr 29, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 306 E WATERS AVENUE TAMPA, FL 33604 **Current Mailing Address: New Mailing Address:** 306 E WATERS AVENUE TAMPA, FL 33604 FEI Number: 20-3945248 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ZIPLER, THERESA D ZIPLER, THERESA D 14324 SKY FLOWER LANE 14324 SKY FLOWER LANE TAMPA, FL, FL 33626 TAMPA,, FL 33626 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: THERESA D ZIPLER 04/29/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition LOPEZ, HAROLD G Name: Name: 911 GASTON PLACE Address: Address: City-St-Zip: TAMPA, FL 33604 City-St-Zip: Title: VΡ Title: () Change () Addition () Delete Name: ZIPLER, THERESA D Name: 14324 SKY FLOWER LANE Address: Address: TAMPA, FL 33626 City-St-Zip: City-St-Zip:

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: HAROLD LOPEZ **PRES** 04/29/2009