

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000128684

Entity Name: ALSM, INC.

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

285 WEST PINE AVENUE
LONGWOOD, FL 32750

New Principal Place of Business:

254 SOUTH RONALD REGAN BOULEVARD
SUITE 136
LONGWOOD, FL 32750

Current Mailing Address:

285 WEST PINE AVENUE
LONGWOOD, FL 32750

New Mailing Address:

254 SOUTH RONALD REGAN BOULEVARD
SUITE 136
LONGWOOD, FL 32750

FEI Number: 20-5693733

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSSINSKY, MARC P
2699 LEE ROAD
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

OSSINSKY, MARC P
2699 LEE ROAD
SUITE 101
WINTER PARK, FL 32789 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: MARC P. OSSINSKY

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ASBURY, ANDREW V
Address: 285 W. PINE AVENUE
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ASBURY, ANDREW V
Address: 254 SOUTH RONALD REGAN BOULEVARD
City-St-Zip: LONGWOOD, FL 32750

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: ANDREW V. ASBURY

P

04/27/2007

Electronic Signature of Signing Officer or Director

Date