

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000013297

Entity Name: ALBENNA, INC.

FILED
Feb 10, 2009
Secretary of State

Current Principal Place of Business:

33 LANE AVE
JACKSONVILLE, FL 32254

New Principal Place of Business:

Current Mailing Address:

33 LANE AVE
JACKSONVILLE, FL 32254

New Mailing Address:

221 EVERGREEN LANE
MIDDLEBURG, FL 32068 US

FEI Number: 20-8386266

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CROSS, ELENA A
33 LANE AVE
JACKSONVILLE, FL 32254 US

Name and Address of New Registered Agent:

CROSS, ELENA A
221 EVERGREEN LANE
MIDDLEBURG, FL 32068 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: ELENA A. CROSS

02/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: CROSS, ELENA A
Address: 221 EVERGREEN LN
City-St-Zip: MIDDLEBURG, FL 32068

Title: VP () Delete
Name: CROSS, ELENA A
Address: 221 EVERGREEN LN
City-St-Zip: MIDDLEBURG, FL 32068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: ELENA A. CROSS

PSTD

02/10/2009

Electronic Signature of Signing Officer or Director

Date