

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000029132

Entity Name: ALPHA XL, INC.

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

## **Current Principal Place of Business:**

13004 SUMMERLAKE WAY  
CLERMONT, FL 34711 US

## **New Principal Place of Business:**

320 LAKEVIEW ST.  
321  
ORLANDO, FL 32804 US

## **Current Mailing Address:**

13004 SUMMERLAKE WAY  
CLERMONT, FL 34711 US

## **New Mailing Address:**

320 LAKEVIEW ST.  
321  
ORLANDO, FL 32804 US

FEI Number: 26-2212386

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ATCACHUNAS, CHRISTOPHER J ESQUIRE  
128 EAST LIVINGSTON STREET  
ORLANDO, FL 32801 US

## **Name and Address of New Registered Agent:**

ATCACHUNAS, CHRISTOPHER J ESQUIRE  
840 N. HIGHLAND AVENUE  
ORLANDO, FL 32803 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:

03/15/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: P  
Name: COHEN, JUSTIN  
Address: 13004 SUMMERLAKE WAY  
City-St-Zip: CLERMONT, FL 34711 US

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: JUSTIN COHEN

P

03/15/2010

Electronic Signature of Signing Officer or Director

Date