## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000107862

FILED Mar 26, 2009 Secretary of State

Entity Name: KISSIM	MEE AHP ALLIANCE, INC.				
Current Principal Pla	ce of Business:	New Princ	New Principal Place of Business:		
3079 PEACHTREE ONDUSTRIAL BLVD DULUTH, GA 30097			3079 PEACHTREE INDUSTRIAL BLVD DULUTH, GA 30097		
Current Mailing Address:		New Maili	New Mailing Address:		
3079 PEACHTREE ONDUSTRIAL BLVD DULUTH, GA 30097			3079 PEACHTREE INDUSTRIAL BLVD DULUTH, GA 30097		
FEI Number: 26-3872958	FEI Number Applied For ( )	FEI Number Not Appl	icable ( ) Certificate of Sta	atus Desired ( )	
Name and Address of Current Registered Agent:		Name and	Name and Address of New Registered Agent:		
CORPDIRECT AGENT 515 E PARK AVE TALLAHASSEE, FL 32	•				
The above named entit in the State of Florida.	y submits this statement for the pu	rpose of changing i	s registered office or registere	ed agent, or both,	
SIGNATURE:					
Electr	onic Signature of Registered Agen	t	Date		
Election Campaign Financ	ing Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	PTD ( ) Change (X) Additi WACHOWIAK, GREG 3079 PEACHTREE INDUSTRIAL E DULUTH, GA 30097		
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	CEO ( ) Change (X) Additi LYNCH, SEAN 3079 PEACHTREE INDUSTRIAL E DULUTH, GA 30097		
Title: Name: Address: City-St-Zip:	( ) Delete	Title: Name: Address: City-St-Zip:	SD ( ) Change (X) Additi LYNCH, SEAN 3079 PEACHTREE INDUSTRIAL E DULUTH, GA 30097		

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: GREG WACHOWIAK PTD 03/26/2009