## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000058224

Entity Name: ALICE JUNE INC.

Address:

City-St-Zip:

1145 9TH AVENUE NORTH

SAINT PETERSBURG, FL 33705

FILED Apr 26, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place	New Principal Place of Business:	
1145 9TH AVENUE NORTH SAINT PETERSBURG, FL 33705 US			US		240 DR MLK JR ST NORTH SAINT PETERSBURG, FL 33705 US	
Current Mailing Address:				New Mailing Addres	New Mailing Address:	
	AVENUE NOF TERSBURG, F		US			
FEI Number	: 59-3264529	FEI Numb	per Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
1145 9TH SAINT PE	IANN, SALLY AVENUE NOR TERSBURG, F e named entity : e of Florida.	L 33705	US s statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:					
	Electror	nic Signatu	re of Registered Age	ent	Date	
Election Ca	mpaign Financin	g Trust Fund	d Contribution ( ).			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	DP ( ) ZIMMERMANN 1145 9TH AVEI SAINT PETERS	UE NORTH	33705	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	DST ( )	Delete		Title: Name:	( ) Change ( ) Addition	

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: SALLY ZIMMERMANN DP 04/26/2009