## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000084973

Address:

City-St-Zip:

Entity Name: COLLINSWORTH, ALTER, LAMBERT, INC.

FILED Mar 25, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 23 EGANFUSKEE STREET 102 JUPITER, FL 33477 **New Mailing Address: Current Mailing Address:** 23 EGANFUSKEE STREET JUPITER, FL 33477 FEI Number: 65-0646888 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DOWLING, ROBERTA L 5803 NW 151 STREET THIRD FLOOR MIAMI LAKES, FL 33014 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition LAMBERT, DON A JR Name: Name: 10674 SW COREY PLACE Address: Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip: Title: Title: () Delete () Change () Addition DOWLING, ROBERTA L Name: Name: 5803 NW 151 STREET, THIRD FLOOR Address: Address: MIAMI LAKES, FL 33014 City-St-Zip: City-St-Zip: Title: Title: TD ( ) Delete () Change () Addition ALTER, DAVID I Name: Name: 5803 NW 151 STREET, THIRD FLOOR Address: Address: City-St-Zip: MIAMI LAKES, FL 33014 City-St-Zip: Title: VD () Delete Title: () Change () Addition COLLINSWORTH, W. MEADE Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: DON A LAMBERT, JR. PD 03/25/2009

5803 NW 151 STREET, THIRD FLOOR

MIAMI LAKES, FL 33014