

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000036401

**FILED**  
**Apr 15, 2011**  
**Secretary of State**

**Entity Name:** FOREMOST MANAGEMENT COMPANY

**Current Principal Place of Business:**

3016 SW 20 STREET  
E-108  
OCALA, FL 34474

**New Principal Place of Business:**

**Current Mailing Address:**

3016 SW 20 STREET  
E-108  
OCALA, FL 34474

**New Mailing Address:**

**FEI Number:** 59-3390882

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALVARINO, HECTOR  
3016 SW 20TH ST  
E-108  
OCALA, FL 34474 US

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

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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ALVARINO, AUGUSTO  
Address: 3016 SW 20 ST I-108  
City-St-Zip: Ocala, FL 34474

Title: D  
Name: ALVARINO, HECTOR  
Address: 3016 SW 20TH ST APT I108  
City-St-Zip: Ocala, FL 34474

Title: D  
Name: ALVARINO, GABRIELA  
Address: 3016 SW 20TH STREET APT I-108  
City-St-Zip: Ocala, FL 34474

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: AUGUSTO ALVARINO

D

04/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date