

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000033877

**FILED**  
**Apr 12, 2010**  
**Secretary of State**

**Entity Name:** ALAN LOWELL SEMINARS, INC.

**Current Principal Place of Business:**

13131 LAKESHORE GROVE DR  
WINTER GARDEN, FL 34787 US

**New Principal Place of Business:**

5889 S. WILLIAMSON BOULEVARD  
1428  
PORT ORANGE, FL 32128 US

**Current Mailing Address:**

5889 S. WILLIAMSON BLVD  
SUITE 1428  
PORT ORANGE, FL 32128 US

**New Mailing Address:**

**FEI Number:** 65-0826374      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LOWELL, ALAN L  
13131 LAKESHORE GROVE DR  
WINTER GARDEN, FL 34787 US

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

LOWELL, ALAN L  
5889 S. WILLIAMSON BOULEVARD  
1428  
PORT ORANGE, FL 32128 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: ALAN L. LOWELL

04/12/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: LOWELL, ALAN L  
Address: 5889 S. WILLIAMSON BOULEVARD SUITE 1428  
City-St-Zip: PORT ORANGE, FL 32128 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: ALAN L. LOWELL

PRES

04/12/2010

Electronic Signature of Signing Officer or Director

Date