

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000030401

**FILED**  
**Mar 02, 2011**  
**Secretary of State**

**Entity Name:** ALTERNATIVES IN MANAGEMENT, INC.

**Current Principal Place of Business:**

4141 S. TAMIAMI TR  
#18  
SARASOTA, FL 34231

**New Principal Place of Business:**

**Current Mailing Address:**

4141 S. TAMIAMI TR  
#18  
SARASOTA, FL 34231

**New Mailing Address:**

**FEI Number:** 65-0908303

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEVINE, ROBERT R  
7338 PERIWINKLE DRIVE  
SARASOTA, FL 34231 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: DEVINE, ROBERT R  
Address: 7338 PERIWINKLE DRIVE  
City-St-Zip: SARASOTA, FL 34231

Title: D  
Name: GALICA-DEVINE, KATHLEEN  
Address: 7338 PERIWINKLE DRIVE  
City-St-Zip: SARASOTA, FL 34231

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: ROBERT DEVINE

PRES

03/02/2011

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

\_\_\_\_\_  
Date