

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000046033

Entity Name: ALEGIAN GROUP, INC.

FILED  
Apr 11, 2007  
Secretary of State

## Current Principal Place of Business:

2503 DEL PRADO BLVD. S.  
STE 502  
CAPE CORAL, FL 33904

## New Principal Place of Business:

1411 SE 47TH ST  
SUITE 9  
CAPE CORAL, FL 33904

## Current Mailing Address:

2503 DEL PRADO BLVD. S.  
STE 502  
CAPE CORAL, FL 33904

## New Mailing Address:

1411 SE 47TH ST  
SUITE 9  
CAPE CORAL, FL 33904

FEI Number: 65-0942802

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EZERINS, VILNIS A  
2503 DEL PRADO BLVD. S  
CAPE CORAL, FL 33904 US

## Name and Address of New Registered Agent:

EZERINS, VILNIS A  
1411 SE 47TH STREET  
SUITE #9  
CAPE CORAL, FL 33904 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:

04/11/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: STD ( ) Delete  
Name: EZERINS, VILNIS A  
Address: 5341 NAUTILUS DRIVE  
City-St-Zip: CAPE CORAL, FL 33904

Title: P (X) Delete  
Name: O'CONNELL, NEIL  
Address: 2503 DEL PRADO BLVD. S.  
City-St-Zip: CAPE CORAL, FL 33904

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: EZERINS, VILNIS A  
Address: 5337 NAUTILUS DRIVE  
City-St-Zip: CAPE CORAL, FL 33904

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: VILNIS EZERINS

P

04/11/2007

Electronic Signature of Signing Officer or Director

Date