

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000059376

Entity Name: ALFA VENTURES, INC.

FILED  
Apr 11, 2012  
Secretary of State

**Current Principal Place of Business:**

605 PALENCIA CLUB DR  
SAINT AUGUSTINE, FL 32095

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 11189  
MONTGOMERY, AL 36110189

**New Mailing Address:**

FEI Number: 52-2214429

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: FORSYTHE, RALPH  
Address: 2108 E. SOUTH BOULEVARD  
City-St-Zip: MONTGOMERY, AL 36116

Title: P  
Name: KETZLER, KEVIN L  
Address: 2108 E. SOUTH BOULEVARD  
City-St-Zip: MONTGOMERY, AL 36116

Title: VPT  
Name: FAIN, J. MARK  
Address: 2108 E. SOUTH BOULEVARD  
City-St-Zip: MONTGOMERY, AL 36116

Title: S  
Name: COONER, ANGELA L  
Address: 2108 E. SOUTH BOULEVARD  
City-St-Zip: MONTGOMERY, AL 36116

Title: VP  
Name: NICKLES, JEFFREY  
Address: 2108 E. SOUTH BOULEVARD  
City-St-Zip: MONTGOMERY, AL 36116

Title: D  
Name: NEWBY, JERRY A  
Address: 2108 E. SOUTH BOULEVARD  
City-St-Zip: MONTGOMERY, AL 36116

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: JEFFREY NICKLES

VP

04/11/2012

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

\_\_\_\_\_ Date