

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S42553

FILED
Feb 09, 2012
Secretary of State

Entity Name: ALPHA FOLIAGE, INC.

Current Principal Place of Business:

27600 S.W. 217TH AVE.
HOMESTEAD, FL 33031 US

New Principal Place of Business:

Current Mailing Address:

18455 S.W. 264TH ST.
HOMESTEAD, FL 33031 US

New Mailing Address:

FEI Number: 65-0268608 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEMOTT, CAROLYN G
18455 S.W. 264TH ST.
HOMESTEAD, FL 33031 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: VD
Name: DEMOTT, JOHN C.
Address: 18455 S.W. 264TH ST.
City-St-Zip: HOMESTEAD, FL 33031 US

Title: STD
Name: DEMOTT, CAROLYN G.
Address: 18455 S.W. 264TH ST.
City-St-Zip: HOMESTEAD, FL 33031 US

Title: PD
Name: BUSTER, CHARLES S.
Address: 24050 S.W. 162ND AVE.
City-St-Zip: HOMESTEAD, FL 33031 US

Title: VD
Name: BUSTER, M.A.
Address: 24050 S.W. 162ND AVE.
City-St-Zip: HOMESTEAD, FL 33031 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: JOHN C. DEMOTT

VD

02/09/2012

Electronic Signature of Signing Officer or Director

Date