## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# V64390

Entity Name: AL-MANGOUR ASSOCIATES, INC

FILED Apr 22, 2008 Secretary of State

Littly Nai	Me. AL-IVIANGOUR ASSOCIATES, INC.			
Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
826 LAKESHORE DRIVE TALLAHASSEE, FL 32312			826 NORTH LAKESHORE DRIVE TALLAHASSEE, FL 32312	
Current Mailing Address:		New Mailing Address	New Mailing Address:	
826 LAKESHORE DRIVE TALLAHASSEE, FL 32312			826 NORTH LAKESHORE DRIVE TALLAHASSEE, FL 32312	
FEI Number:	: 59-3151317 FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		: Name and Address of	Name and Address of New Registered Agent:	
BAILEY, L. BLAIR 826 LAKESHORE DRIVE TALLAHASSEE, FL 32312 US			BAILEY, L. BLAIR 826 NORTH LAKESHORE DRIVE TALLAHASSEE, FL 32312 US	
	named entity submits this statement for t e of Florida.	he purpose of changing its registered	office or registered agent, or both,	
SIGNATURE:			04/22/2008	
Electronic Signature of Registered Agent		Agent	Date	
Election Car	mpaign Financing Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete AL-MANGOUR, ABDULAZIZ 826 LAKESHORE DRIVE TALLAHASSEE, FL 32312	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () Delete BAILEY, L. BLAIR 44826 LAKESHORE DRIVE TALLAHASSEE, FL 32312	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name:	VP ( ) Delete BAILEY, E. LAMAR	Title: ( Name:	) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: E. LAMAR BAILEY VP 04/22/2008

826 LAKESHORE DRIVE

TALLAHASSEE, FL 32312

Address: City-St-Zip: