## 2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000002491

Entity Name: T.M. ALPHIN, INC.

**Current Principal Place of Business:** 

115 MOSSYDALE CT

CLEMMONS. NC 27012

**Current Mailing Address:** 

PO BOX 5

WALKERTOWN, NC 27051 US

FEI Number: 59-3417178 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ALPHIN, RIENE T 115 MOSSYDELL CT CLEMMONS, FL 27012 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: ALPHIN RIENE 01/28/2025

Electronic Signature of Registered Agent

Date

**FILED** Jan 28, 2025

**Secretary of State** 

2948033706CC

Officer/Director Detail:

Title Title **PRESIDENT** Name ALPHIN, THOMAS MORRIS Name ALPHIN, RIENE Address 115 MOSSYDALE CT Address 115 MOSSYDALE CT City-State-Zip: CLEMMONS NC 27012 City-State-Zip: CLEMMONS NC 27012

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.

01/28/2025 SIGNATURE: RIENE ALPHIN **MANAGER**