

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000001675

Entity Name: SPM OF ALABAMA, LLC**Current Principal Place of Business:**913 S. PARSONS AVE., SUITE A
BRANDON, FL 33511**Current Mailing Address:**ATTN: GLENDA LOVE
P. O. BOX 55465
BIRMINGHAM, AL 35255 US**FEI Number:** 63-1042087**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title	MGRM
Name	FIELD, ROBERT C
Address	1103 RICHARD ARRINGTON,JR BLVD. SOUTH
City-State-Zip:	BIRMINGHAM AL 35205

Title	MGRM
Name	WELDEN, WILLIAM B
Address	1103 RICHARD ARRINGTON,JR BLVD. SOUTH
City-State-Zip:	BIRMINGHAM AL 35205

Title	MGRM
Name	WELDEN, CHARLES VIII
Address	1103 RICHARD ARRINGTON,JR BLVD. SOUTH
City-State-Zip:	BIRMINGHAM AL 35205

Title	MGRM
Name	WELDEN, WILLIAM E JR.
Address	1103 RICHARD ARRINGTON,JR BLVD. SOUTH
City-State-Zip:	BIRMINGHAM AL 35205

Title	MGRM
Name	WINCH, STEPHEN E
Address	1103 RICHARD ARRINGTON, JR. BLVD. SOUTH
City-State-Zip:	BIRMINGHAM AL 35205

Title	VP
Name	RUSSELL, CHARLOTTE
Address	913 SOUTH PARSONS AVENUE SUITE A
City-State-Zip:	BRANDON FL 33511

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM B WELDEN**MANAGER****03/27/2024**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date