

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A33524**

1. Entity Name

ALPHA FIRST INVESTORS, LTD.

FILED

00 JAN 24 PM 1:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business 27401 WESTOWN BOULEVARD SUITE. 1507 WESTLAKE OH 44145	Mailing Address 27401 WESTOWN BOULEVARD SUITE. 1507 WESTLAKE OH 44145-4544
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2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **59-3168443**

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**OLIVER, DAVID S
111 NORTH ORANGE AVENUE
SUITE 2050
ORLANDO FL 32801**

Name	Street Address (P.O. Box Number is Not Acceptable)	City	FL	Zip Code

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. Capital Contributions as Shown on record. **\$3,000,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	P40861 FIRST INVESTORS GRP, INC 27401 WESTOWN BLVD. #1507 WESTLAKE OH 44145	STREET ADDRESS	100003118001--0
DOCUMENT #		CITY - ST - ZIP	-02/01/00--01053--013
DOCUMENT #		STREET ADDRESS	***535.00 ***535.00
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

By: **First Investors Group, Inc., its General Partner**

SIGNATURE: *[Signature]* President 01/15/00 (440) 835-0950

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #