

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2000 8:00 am
Secretary of State

05-12-2000 90029 026 ***150.00

DOCUMENT # F98000005004

1. Entity Name

ALTERNATIVE ELECTRICAL SERVICES, INC.

Principal Place of Business

Mailing Address

6210 B SHEPHERDSVILLE RD
 LOUISVILLE KY 40228
 US

P.O. BOX 35367
 LOUISVILLE KY 40232-5367

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 **31-1551646**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME	STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME	STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CEO SEYMOUR, KENNETH G	6210-B OLD SHEPHERDSVILLE RD. LOUISVILLE KY 40229	<input type="checkbox"/>			<input type="checkbox"/>
P ROBERTS, THOMAS R	6210-B OLD SHEPHERDSVILLE RD. LOUISVILLE KY 40229	<input type="checkbox"/>			<input type="checkbox"/>
V ECKENFELS, ROBERT E	6210-B OLD SHEPHERDSVILLE RD. LOUISVILLE KY 40229	<input type="checkbox"/>			<input type="checkbox"/>
V YOCUM, JAMES Y	6210-B OLD SHEPHERDSVILLE RD. LOUISVILLE KY 40229	<input type="checkbox"/>			<input type="checkbox"/>
ST SEYMOUR, MARY	5315 TAHIA DR. LOUISVILLE KY 40216	<input type="checkbox"/>			<input type="checkbox"/>
		<input type="checkbox"/>			<input type="checkbox"/>

13. 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 or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mary Seymour*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/00 (502) 961-0800
 Date Daytime Phone #

CR2E034 (9/99)