

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000061892

**Entity Name:** ALTERNATIVE ENERGY SERVICES, INC.

**Current Principal Place of Business:**

1417 CHAFFEE DRIVE, SUITE 1  
TITUSVILLE, FL 32780

**Current Mailing Address:**

1417 CHAFFEE DRIVE, SUITE 1  
TITUSVILLE, FL 32780 US

**FEI Number: 26-2934694**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

EIGENMANN, CONRAD DJR  
1417 CHAFFEE DRIVE, SUITE 1  
TITUSVILLE, FL 32780 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

**Officer/Director Detail :**

Title            BMD  
Name            EIGENMANN, CONRAD DJR  
Address        1417 CHAFFEE DRIVE, SUITE 1  
City-State-Zip: TITUSVILLE FL 32780

Title            PD  
Name            EIGENMANN, CLAYTON  
Address        1417 CHAFFEE DRIVE, SUITE 1  
City-State-Zip: TITUSVILLE FL 32780

Title            VPD  
Name            SCHARF, MICHAEL J  
Address        1417 CHAFFEE DRIVE, SUITE 1  
City-State-Zip: TITUSVILLE FL 32780

Title            SECRETARY  
Name            FITZGERALD, ANNE  
Address        1417 CHAFFEE DRIVE, SUITE 1  
City-State-Zip: TITUSVILLE FL 32780

*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.*

**SIGNATURE: MICHAEL J. SCHARF**

**VICE PRESIDENT**

**01/06/2017**

Electronic Signature of Signing Officer/Director Detail

Date