

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 272816

1. Entity Name  
THE ALAN COMPANY

**FILED**  
**Apr 17, 2000 8:00 am**  
**Secretary of State**

04-17-2000 90017 039 \*\*\*150.00

Principal Place of Business

Mailing Address

1725 U S NO 1  
VERO BEACH FL 32960

1725 US 1  
VERO BEACH FL 32960-5544  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-1039721

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

IANNOTTI, A. MILDRED  
1725 US 1  
VERO BEACH FL 32960

Name JANIS BARNHILL  
Street Address (P.O. Box Number is Not Acceptable) 1725 US 1  
VERO BEACH FL  
City FL Zip Code 32960

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 Abdye Agent Deceased 7/31/99 DATE  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	PD	<input checked="" type="checkbox"/> Delete
NAME	IANNOTTI, A. MILDRED	
STREET ADDRESS	1725 U.S. 1	
CITY-ST-ZIP	VERO BEACH, FL 00000	DECEASED
TITLE	VM	<input type="checkbox"/> Delete
NAME	BARNHILL, JANIS	
STREET ADDRESS	1725 US 1	
CITY-ST-ZIP	VERO BEACH, FL 00000	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	STD GIANNOTTI, MARIE	
STREET ADDRESS	1725 US 1	
CITY-ST-ZIP	VERO BEACH, FL 00000	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PRESIDENT - TREAS.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JANIS BARNHILL	
STREET ADDRESS	1725 US 1	
CITY-ST-ZIP	VERO BEACH FL 32960	
TITLE	<del>SEC. TREAS.</del>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>MARIE GIANNOTTI</del>	
STREET ADDRESS	<del>1725 US 1</del>	
CITY-ST-ZIP	<del>VERO BEACH FL 32960</del>	
TITLE	Vice Pres. - sec.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NANCY Issette	
STREET ADDRESS	1725 US 1	
CITY-ST-ZIP	VERO BEACH FL 32960	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: JANIS BARNHILL President 3-13-00 561-567-5121  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)