

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 415957

1. Entity Name

ALFA INVESTMENT CORPORATION

Principal Place of Business

2108 E SOUTH BLVD BOX 11000
MONTGOMERY AL 36116-2410

Mailing Address

PO BOX 11189
MONTGOMERY AL 36111-0189

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

63-0644262

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

CULVERHOUSE, TOMLINSON, MILLS, DECARIO
N & ANDERSON, 655 FLORIDA NATL BANK BLDG.
JACKSONVILLE FL 32202

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, 2001 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 ☐ Delete
NAME P
STREET ADDRESS NEWBY, JERN A
CITY-ST-ZIP 20405 MOORESVILLE RD.
ATHENS AL 35613

TITLE ☒ Change ☐ Addition
NAME Newby, Jerry A.
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME VP
STREET ADDRESS PROCTOR, DAVID R
CITY-ST-ZIP 2108 EUST SOUTH BLVD.
MONTGOMERY AL 36111

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP montgomery AL 36111

TITLE ☐ Delete
NAME S
STREET ADDRESS SCOTT, H. AL
CITY-ST-ZIP 2108 EAST SOUTH BLVD.
MONTGOMERY AL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME V
STREET ADDRESS ELLIS, C. LEE
CITY-ST-ZIP 2108 E SOUTH BLVD
MONTGOMERY AL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-22-01
Date

334-613-4498
Daytime Phone #

CR2E034 (10/00)