

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 750772

1. Entity Name

A.L.P.H.A., "A BEGINNING," INC.

FILED
May 23, 2002 8:00 am
Secretary of State

05-23-2002 90102 028 ****61.25

Principal Place of Business

Mailing Address

701-5TH AVENUE NORTH
 ST. PETERSBURG FL 33701

701-5TH AVENUE NORTH
 ST. PETERSBURG FL 33701

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

59-1991525

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

DEEB, ROY
 5635 7TH AVENUE N.
 ST. PETERSBURG FL 33710

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEC BRETT, SUE 8022 ELBAIN LANE N SAINT PETERSBURG FL 33710	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BP SAUNDERS, JOSEPH 550 SANDY HOOK RD TREASURE ISLAND FL 33706	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EC SUSAN MITTERMAYR 7132 S SHORE DR S SOUTH PASADENA FL 33707	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILLIAMS, PAM 5801 2ND STR., S ST PETERSBURG FL 33705	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DE DEEB, ROY 5635 7TH AVE N ST. PETERSBURG FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CUNNINGHAM, JACK 5756 WILLIAMS BLVD SEMINOLE FL 33772	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Malatino, Lonnie 14031 Egret Ln Clearwater FL 33672	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Peterson, Janet 2 Paradise Trail Treasure Island, FL 33706	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Cheryl Shaver
 Executive Director
 Cheryl Shaver

4/22/02 (127) 892-8190

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E637 (9/01)