2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 19, 2004 8:00 am Secretary of State

DOCUMENT # 750772 1. Entity Name A.L.P.H.A., "A BEGINNING," INC.				. 1	Secretary of State 07-19-2004 90002 028 ****70.00		
Principal Place of Business Mailing Address 701-5TH AVENUE NORTH 701-5TH AVENUE NORTH ST. PETERSBURG, FL 33701 ST. PETERSBURG, FL						0 2 0 0 0 0	, N U
	년 						
2. Principal P	Star See h.	3. Mailing Address	٠				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		. 07122004 _C	hg-NP	CR2E037 (10/0	»
City & Stat	P- R-15 h	City & State		4. FEI Number 59-199152	?5	-	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of S	tatus Desired	\$8.75 Fee Regi	Additional
	6. Name and Address of Current Re	33701		7. Name and Add	tress of New R		
DEEB, RO	· ·	± *. *	Name -		-		-
				Address (P.O. Box Number is Not Acceptable)			
••••						·	
	Ì		City		·	FL Zip C	ode
			Registered Agent signature required participation and property of the control of	\$5.00 May Be Added to Fees	 And the control of the	DATE ake check payablida Department o	erantera e en entre esta en esta en esta en entre entre
10.	OFFICERS AND DIRE	CTORS	11.	ADDITIONS/CHANG	ES TO OFFICE		
ITILE NAME STREET ADDRESS CITY-SI-ZEP	BRETT, SUE 8022 ELBAIN LANE N SAINT PETERSBURG, FL 33710	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP			☐ Chan	ge 🔲 Addition
TITLE NAME STREET ADDRESS	BP DIVE	☐ Delete	. HILLE				
CITY-ST-ZIP	550 SANDY HOOK RD TREASURE ISLAND, FL 33706		NAME STREET ADDRESS CITY-ST-ZIP			☐ Chan	ge Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	TREASURE ISLAND, FL 33706 JAPAS P MOLATINO, LONNIE 14031 EGRET LANE	☐ Delete	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			☐ Chan	
CITY-ST-ZIP TITLE NAME	TREASURE ISLAND, FL 33706 JAP & P MOLATINO, LONNIE	☐ Delete	STREET ADDRESS CITY-ST-ZIP TITLE NAME		÷		ge Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	TREASURE ISLAND, FL 33706 JPP P P MOLATINO, LONNIE 14031 EGRET LANE CLEARWATER, FL 33672 DRP CROWE, KELLY 14005 RIDGEDALE WAY TAMPA, FL 33625 DE DEEB, ROY		STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			Chan	ge Addition

numerous on this report or suppremental 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: