

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 25, 2001 8:00 am
Secretary of State

01-25-2001 90007 010 ****61.25

DOCUMENT # 760722

1. Entity Name

SPRING HILL ALERT RESIDENTS PATROL, INC.

Principal Place of Business

PO BOX 3422
 SPRING HILL FL 34611

Mailing Address

PO BOX 3422
 SPRING HILL FL 34611

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 **59-2296977**

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

THUMM, RICHARD
1418 MEADOWLARK ROAD
SPRING HILL FL 34608

Name
THUMM, RICHARD
 Street Address (P.O. Box Number is Not Acceptable)
1418 MEADOWLARK ROAD
 City **SPRING HILL FL** Zip Code **34608**

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 *Richard W. Thumm President* **RICHARD THUMM PRESIDENT** JANUARY 10, 2001
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 PD
 NAME **MAGIARACINA, GARY** Delete
 STREET ADDRESS **7132 LOCKWOOD ST.**
 CITY-ST-ZIP **SPRING HILL FL 34606**

TITLE PD
 NAME **THUMM, RICHARD** Change Addition
 STREET ADDRESS **1418 MEADOWLARK ROAD**
 CITY-ST-ZIP **SPRING HILL, FLORIDA 34608**

TITLE VP
 NAME **NEMEZIO, RAY C** Delete
 STREET ADDRESS **11280 CAPTAIN DRIVE**
 CITY-ST-ZIP **SPRING HILL FL 34608**

TITLE VP
 NAME **PRAHLER, LOUIS** Change Addition
 STREET ADDRESS **1173 DESMOND AVENUE**
 CITY-ST-ZIP **SPRING HILL, FLORIDA 34608**

TITLE SD
 NAME **GREGORY, CARMELLA** Delete
 STREET ADDRESS **178 BATON AVE**
 CITY-ST-ZIP **SPRING HILL FL 34606**

TITLE SD
 NAME **LOHLEIN, EDITH** Change Addition
 STREET ADDRESS **476 RIO VISTA COURT**
 CITY-ST-ZIP **SPRING HILL, FLORIDA 34608**

TITLE TD
 NAME **AKERS, GWEN L.** Delete
 STREET ADDRESS **11509 SPRINGHILL DR.**
 CITY-ST-ZIP **SPRINGHILL FL 34609**

TITLE TD
 NAME **AKERS, GWEN** Change Addition
 STREET ADDRESS **11509 SPRING HILL DRIVE**
 CITY-ST-ZIP **SPRING HILL, FLORIDA 34609**

TITLE D
 NAME **KOHLER, DANIEL** Delete
 STREET ADDRESS **12476 AGATHA LANE**
 CITY-ST-ZIP **SPRING HILL FL 34609**

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Delete

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 *Richard W. Thumm* **RICHARD W. THUMM** JANUARY 10, 2001 (352) 683-5936
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)