

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 817745

FILED
Apr 02, 2003
Secretary of State

Entity Name: WEST ALTON CORPORATION

Current Principal Place of Business:

1920 MERIDIAN AVE
2ND FLOOR
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

6600 WEST BROAD ST
SUITE 100
RICHMOND, VA 23230

New Mailing Address:

FEI Number: 52-0799757

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ, MANNY
1920 MERIDIAN AVE 2ND FLOOR
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPSD () Delete
Name: GUMENICK, SOPHIA
Address: 1920 MERIDIAN AVE 2ND FLOOR
City-St-Zip: MIAMI BEACH, FL 33139

Title: PD () Delete
Name: GUMENICK, JEROME
Address: 6600 W. BROAD STREET
City-St-Zip: RICHMOND, VA 23230

Title: T () Delete
Name: GUMENICK, RANDOLPH S
Address: 1920 MERIDIAN AVE 2ND FLOOR
City-St-Zip: MIAMI BEACH, FL 33139

Title: AS () Delete
Name: GUMENICK, JEFFREY H
Address: 6600 W. BROAD STREET
City-St-Zip: RICHMOND, VA 23230

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEROME GUMENICK

PD

04/02/2003

Electronic Signature of Signing Officer or Director

Date