

JAN-11-01 17:00

FROM-

12483570160

T-844 P.02/02 F-033

DOCUMENT # F00000004684

1. Entity Name

ALTERNATIVELENDING.COM, INC.

FILED

01 FEB 16 AM 10:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1430 EAST MISSOURI AVE., SUITE 125
PHOENIX AZ 85014

Mailing Address

1430 EAST MISSOURI AVE., SUITE 125
PHOENIX AZ 85014

2. Principal Place of Business

25899 W. 12 Mile Road

3. Mailing Address

1430 E. Missouri Ave

Suite, Apt. #, etc.

Suite 350

Suite, Apt. #, etc.

Suite 125

City & State

Southfield, Mi.

City & State

Phoenix, Az

Zip

48034

Country

Zip

85014

Country

Maricopa

4. FEI Number

34-3924650

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

8. Name and Address of Current Registered Agent

FLORIDA COMPLIANCE SPECIALIST, INC.
1331 EAST LAFAYETTE STREET, SUITE F
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

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 filer if applicable

(NOTE: Registered Agent signature required when resigning)

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 State10. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PCEO
MERTZ, R. JEFFREY
1430 EAST MISSOURI AVE., SUITE 125
PHOENIX AZ 85014☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
REECE, JONATHAN V
1430 EAST MISSOURI AVE., SUITE 125
PHOENIX AZ 85014☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
(President / Secretary) PS
James P. Mack
25899 W. 12 Mile Road, suite 350
Southfield, Mi. 48034☐ Change☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
9000003745329-8
02/21/01
****150.00 ****150.00
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature and name have not been changed or that the receiver or trustee empowered to execute this report as required by Chapter 218, Florida Statutes, and that my name appears in Block 11 or Block 12 or 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

James P. Mack

James P. Mack

1/7/00

248-357-2600