

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91510 049 ***150.00

DOCUMENT # F01000002942

1. Entity Name

ALLIANCE RECOVERY MANAGEMENT, INC.

Principal Place of Business

**1815 CHANDLERSVILLE ROAD
 ZANESVILLE OH 43701**

Mailing Address

**1815 CHANDLERSVILLE ROAD
 ZANESVILLE OH 43701**

2. Principal Place of Business

3. Mailing Address

800 Techcenter Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Gahanna OH

4. FEI Number

31-1754411

Applied For

Not Applicable

Zip

Country

Zip

Country

43230

USA

5. Certificate of Status Desired ☐

\$8.75. Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

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

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, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SZEFTEL, IVAN M 1815 CHANDLERSVILLE ROAD ZANESVILLE OH	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SCHUMACHER JR, RICHARD E 1815 CHANDLERSVILLE ROAD ZANESVILLE OH	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MELVIN, CAROLYN S 1815 CHANDLERSVILLE ROAD ZANESVILLE OH	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KACHIC, KENNETH E 1815 CHANDLERSVILLE ROAD ZANESVILLE OH	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GROOMES, DANIEL T 5422 RED BANK RD GALENA OH	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KUBIC, MICHAEL H 300 DUNLIN LANE COPPELL TX	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
800 Techcenter Drive Gahanna, OH 43230	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
800 Techcenter Drive Gahanna, OH 43230	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
800 Techcenter Drive Gahanna, OH 43230	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
220 West Schrock Road Westerville, OH 43081	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
800 Techcenter Drive Gahanna, OH 43230	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
17655 Waterview Parkway Dallas, TX 75252	

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VP-MX

Date

4-16-02

Daytime Phone #

614-729-4678

CR2E034 (9/01)