

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 06, 2000 8:00 am
Secretary of State

06-06-2000 90007 035 ***150.00

DOCUMENT # F93000001687

1. Entity Name

TECHNICAL MANAGEMENT SERVICES OF ALABAMA, INC.

Principal Place of Business

Mailing Address

P.O. BOX 7452
 MOBILE AL 36670

P.O. BOX 7452
 MOBILE AL 36670

2. Principal Place of Business

3. Mailing Address

660 Loeffler St.

P.O. Box 160009

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Mobile, AL

City & State

Mobile, AL

Zip

Country

Zip

Country

36607

USA

36616

4. FEI Number

63-0884605

Applied For

Not Applicable

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

HALL, SHELDON R.
 1138 S.E. 5TH STREET
 OCALA FL 34471

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, 2000 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

TITLE CPT
 NAME MILLER, WILLIAM F.
 STREET ADDRESS 6904 STONEBROOK DR. N.
 CITY - ST - ZIP MOBILE AL 36695 ☐ Delete

TITLE VPS
 NAME MILLER, RICHARD D.
 STREET ADDRESS 7012 CHARLESTON OAKS DR.
 CITY - ST - ZIP MOBILE AL 36695 ☐ Delete

TITLE D
 NAME MILLER, SHERRY P.
 STREET ADDRESS 7012 CHARLESTON OAKS DR.
 CITY - ST - ZIP MOBILE AL 36695 ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Change ☐ Addition

TITLE SECRETARY
 NAME ANITA H. MILLER
 STREET ADDRESS 6904 STONEBROOK DR. N.
 CITY - ST - ZIP MOBILE, AL 36695 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
 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)(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 file empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/00 (334) 478-9032
 Date Daytime Phone #