## 2000 UNIFORM BUSINESS REPORT (UBR)

of the corporation or the receiver or true changed, or on an attachment with an

SIGNATURE: 🖈

## FILED DOCUMENT # F9600005465 Jul 19, 2000 8:00 am 1. Endly Name Secrétary of State THE ALPEN HOUSE LIMITED, CORPORATION 07-19-2000 90004 029 \*\*\*150.00 Principal Place of Business Mailing Address 14875 BAYVIEW AVE. RR#2 14216 N US HIGHWAY 27 AURORA. ONTARIO L4G 3G8 OCALA FL 34482 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 98-0076788 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name.\_\_\_\_ ROBERTS, MARK Street Address (P.O. Box Number is Not Acceptable) 14216 N. US HWY 27 OCALA FL 34482 Zip Code FL 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 FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Change Addition ☐ Delete TITLE TITLE STRONACH, BELINDA NAME NAME STREET ADDRESS STREET ADDRESS 14875 BAYVIEW AVE, RR#2 CITY-ST-ZIP CITY-ST-ZIP AURORA, ONTARIO L4G 3G8 Change ☐ Addition TITLE □ Delete TITLE NAME STRONACH, ELFRIEDE NAME STREET ADDRESS 14875 BAYVIEW AVE, RR#2 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AURORA, ONTARIO L4G 3G8 ☐ Change ☐ Addition TITLE Delete TITLE NAME STRONACH, ANDREW NAME STREET ADDRESS 6 HUMBERLINE DR, UNIT 903 STREET ADDRESS CITY-ST-ZIP ETOBICOKE, ONTARIO CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP es not dalify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information cured and that my signature shall have the same legal effect as if made under oath; that I am an officer or director ecute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if life empowered. 13. I hereby certify that the information supplied with this filing indicated on this report or supplemental report is true applications.

CUMMark Roberts

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/11/2000

352-620-2343

Daytime Phone #



## ADENA-SPRINGS

July 11, 2000

Department of State Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

RE: First Notice filing report never received

Dear Sir or Madam:

Enclosed is the corporate annual report for the Alpen House Limited. After speaking with your office earlier today, I was told to send a check for \$150.00 for the filing fees. We have never received the first notice - only the second notice. If you look at the past year's report and payment - it was paid on 01/29/99 and we would have promptly paid this years, had we received it.

Thanking you in advance for your attention to this matter.

Sincerely,

L.J. Guest Bookkeeper