

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005124

FILED
Apr 20, 2004
Secretary of State

Entity Name: ALPHA NEVADA CORPORATION

Current Principal Place of Business:

1223 WEST MAIN STREET
SUITE #253
SUN PRAIRIE, WI 53590

New Principal Place of Business:

Current Mailing Address:

PO BOX 228
SCHUYLER, NE 68661

New Mailing Address:

FEI Number: 39-1919415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERNAL, CECILIA
7720 SW 77TH AVENUE
MIAMI, FL 33143

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: P () Delete
Name: LUNDBERG, JACK
Address: 5168 S. CEMETARY RD
City-St-Zip: POPLAR, WI 54864

Title: VP () Delete
Name: GARY, PRICE C
Address: 5779 PARKVIEW DRIVE
City-St-Zip: SUN PRAIRIE, WI 53590

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: GARY, PRICE C
Address: 4952 THORSON ROAD
City-St-Zip: SUN PRAIRIE, WI 53590

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: GARY C. PRICE

VP

04/20/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date