

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2002 8:00 am
Secretary of State
 05-08-2002 90128 044 ***150.00

DOCUMENT # F99000002450

1. Entity Name
ALFA SMARTPARKS, INC.

Principal Place of Business
50 N. LAURA STREET, SUITE 3400
JACKSONVILLE FL 32202

Mailing Address
50 N. LAURA STREET, SUITE 3400
JACKSONVILLE FL 32202



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
One West Adams Street
 Suite, Apt. #, etc.
2nd Floor

3. Mailing Address
One West Adams Street
 Suite, Apt. #, etc.
2nd Floor

City & State
Jacksonville, FL

City & State
Jacksonville, FL

Zip
32202

Country
USA

4. FEI Number **59-3488651**

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GOLDMAN, NATHAN D 50 N. LAURA STREET, SUITE 3400 JACKSONVILLE FL 32202 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS GRIGGS, GWEN HUTCHESON 50 N. LAURA STREET, SUITE 3400 JACKSONVILLE FL 32202 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DREW, RANDAL H 50 N. LAURA STREET, SUITE 3400 JACKSONVILLE FL 32202 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BARKLEY, ANDY 50 N. LAURA STREET, SUITE 3400 JACKSONVILLE FL 32202 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC ALLAMANIS, APOSTOLOS G 4 AP PAVLOU STREET MAROUSSI ATHENS GREECE 15-1 23 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COCHRAN, LARRY B 100 SILVER SPUR HORSESHOE BAY TX 78657 <input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/ Goldman, Nathan D. One West Adams St., 2nd Floor Jacksonville, FL 32202 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/S Griggs, Gwen Hutcheson One West Adams St., 2nd Floor Jacksonville, FL 32202 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Drew, Randal H. One West Adams St., 2nd Floor Jacksonville, FL 32202 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/T Barkley, Andy One West Adams St., 2nd Floor Jacksonville, FL 32202 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 like empowered.

SIGNATURE: Gwen Hutcheson, Secretary 4/24/02 (904) 598-6684
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

Attachment # F99000002450/

652556

ALFA SMARTPARKS, INC.
F990000002450

Attachment to 2002 Uniform Business Report (UBR)

Directors

D
Velonis, Nikolaos A.
4 AP. Pavlou Street
151 23 Maroussi, Athens
Greece

☒ Delete

D
Kontizas, Apostolos
4 AP. Pavlou Street
151 23 Maroussi, Athens
Greece

☒ Addition