

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

3. Mailing Address
One West Adams Street

Suite, Apt. #, etc.
2nd Floor

Suite, Apt. #, etc.
2nd Floor

City & State
Jacksonville, FL

City & State
Jacksonville, FL

4. FEI Number **59-3488651**

Applied For
 Not Applicable

Zip Country
32202 USA

Zip Country
32202 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

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525**

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 Delete
V
 NAME **GOLDMAN, NATHAN D**
 STREET ADDRESS **50 N. LAURA STREET, SUITE 3400**
 CITY-ST-ZIP **JACKSONVILLE FL 32202**

TITLE Change Addition
V/
 NAME **Goldman, Nathan D.**
 STREET ADDRESS **One West Adams St., 2nd Floor**
 CITY-ST-ZIP **Jacksonville, FL 32202**

TITLE Delete
VS
 NAME **GRIGGS, GWEN HUTCHESON**
 STREET ADDRESS **50 N. LAURA STREET, SUITE 3400**
 CITY-ST-ZIP **JACKSONVILLE FL 32202**

TITLE Change Addition
V/S
 NAME **Griggs, Gwen Hutcheson**
 STREET ADDRESS **One West Adams St., 2nd Floor**
 CITY-ST-ZIP **Jacksonville, FL 32202**

TITLE Delete
PD
 NAME **DREW, RANDAL H**
 STREET ADDRESS **50 N. LAURA STREET, SUITE 3400**
 CITY-ST-ZIP **JACKSONVILLE FL 32202**

TITLE Change Addition
P/D
 NAME **Drew, Randal H.**
 STREET ADDRESS **One West Adams St., 2nd Floor**
 CITY-ST-ZIP **Jacksonville, FL 32202**

TITLE Delete
T
 NAME **BARKLEY, ANDY**
 STREET ADDRESS **50 N. LAURA STREET, SUITE 3400**
 CITY-ST-ZIP **JACKSONVILLE FL 32202**

TITLE Change Addition
V/T
 NAME **Barkley, Andy**
 STREET ADDRESS **One West Adams St., 2nd Floor**
 CITY-ST-ZIP **Jacksonville, FL 32202**

TITLE Delete
DC
 NAME **ALLAMANIS, APOSTOLOS G**
 STREET ADDRESS **4 AP PAVLOU STREET**
 CITY-ST-ZIP **MAROUSSI ATHENS GREECE 15-1 23**

TITLE Change Addition

TITLE Delete
D
 NAME **COCHRAN, LARRY B**
 STREET ADDRESS **100 SILVER SPUR**
 CITY-ST-ZIP **HORSESHOE BAY TX 78657**

TITLE 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 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 #1 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