

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000003845

1. Entity Name

ALLIANCE EQUI-SERVE, INC.

FILED
May 02, 2000 8:00 am
Secretary of State

05-02-2000 90119 011 ***150.00

Principal Place of Business

6381 METRO PLANTATION ROAD
FORT MYERS FL 33912

Mailing Address

6381 METRO PLANTATION ROAD
FORT MYERS FL 33912-1289

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1001881

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

PARRIS, JUDITH A
6381 METRO PLANTATION ROAD
FORT MYERS FL 33912

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, 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 C
NAME YABLONOWSKI, TIMOTHY ☐ Delete
STREET ADDRESS 6381 METRO PLANTATION ROAD
CITY-ST-ZIP FORT MYERS FL 33912

TITLE PD
NAME JAREMA, KATHLEEN ☒ Delete
STREET ADDRESS 28 GLENWOOD STREET
CITY-ST-ZIP GLENWOOD IL 60425

TITLE VST
NAME PARRIS, JUDITH A ☐ Delete
STREET ADDRESS 6381 METRO PLANTATION ROAD
CITY-ST-ZIP FORT MYERS FL 33912

TITLE V
NAME RIERA, ORLANDO M ☐ Delete
STREET ADDRESS 6381 METRO PLANTATION ROAD
CITY-ST-ZIP FORT MYERS FL 33912

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE C/P ☒ Change ☐ Addition
NAME YABLONOWSKI, TIMOTHY
STREET ADDRESS 6381 METRO PLANTATION ROAD
CITY-ST-ZIP FORT MYERS FL 33912

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

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)