

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F99000005198

FILED  
Apr 17, 2002 8:00 AM  
Secretary of State

**Entity Name:** ALTERNATIVE CONSTRUCTION TECHNOLOGIES CORPORATION

**Current Principal Place of Business:**

992 WINTERBERRY DRIVE  
MARCO ISLAND, FL 34145

**New Principal Place of Business:**

**Current Mailing Address:**

992 WINTERBERRY DRIVE  
MARCO ISLAND, FL 34145

**New Mailing Address:**

**FEI Number:** 65-0805233

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JANSSENS-LENS, PAUL  
992 WINTERBERRY DRIVE  
MARCO ISLAND, FL 34145

**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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CCEO ( ) Delete  
Name: JANSSENS-LENS, PAUL  
Address: 992 WINTERBERRY DRIVE  
City-St-Zip: MARCO ISLAND, FL 34145

Title: P ( ) Delete  
Name: DEMING, JOSEPH  
Address: 1033 LAKE STREET  
City-St-Zip: BOLIVAR, TN 38008

Title: S ( ) Delete  
Name: BOWER, JANNIE  
Address: 992 WINTERBERRY DRIVE  
City-St-Zip: MARCO ISLAND, FL 34145

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

Title: V ( ) Change (X) Addition  
Name: ASH, CAROL  
Address: 1033 LAKE STREET  
City-St-Zip: BOLIVAR, TN 38008

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: JANNIE BOWER

S

04/17/2002

Electronic Signature of Signing Officer or Director

Date