

DOCUMENT # H19419

1. Entity Name

ALTAMONTE PRINTING, INCORPORATED

Principal Place of Business

2649 PEMBERTON DRIVE  
APOPKA FL 32703

Mailing Address

2649 PEMBERTON DRIVE  
APOPKA FL 32703-9403

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

LEWIS, ROBERT  
2649 PEMBERTON DRIVE  
APOPKA FL 32703

Name

Street Address ( )

City

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required)

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

11. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

P

LEWIS, ROBERT

2649 PEMBERTON DRIVE

APOPKA FL

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

12.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 607.1 of the Florida Statutes, and that the information is true and accurate and that my signature shall have the effect of a declaration under oath.

SIGNATURE:

Robert Lewis

President

**SIGNATURE:** *Robert Lewis* 3/16/60 (407) 299-8840  
 \_\_\_\_\_  
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
 Robert Lewis President

CR2E034 (9/99)