

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006471

FILED
Mar 31, 2009
Secretary of State

Entity Name: ALTERNATIVE RESOURCES & TECHNICAL SERVICES, INC.

Current Principal Place of Business:

303 BILL MCGILL ROAD
HAVANA, FL 32333

New Principal Place of Business:

Current Mailing Address:

303 BILL MCGILL ROAD
HAVANA, FL 32333

New Mailing Address:

FEI Number: 06-1786456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS-POTTER, AUDREY
303 BILL MCGILL ROAD
HAVANA, FL 32333 US

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: YOUNG, ANDRE J
Address: 510 DUPONT DRIVE
City-St-Zip: TALLAHASSEE, FL 32305

Title: D () Delete
Name: YOUNG, FREDERICA
Address: 2188 CLAREMONT LANE #D
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: DAVIS, MELANIE
Address: 899 BILL MCGILL ROAD
City-St-Zip: HAVANA, FL 32333

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: D () Change (X) Addition
Name: ROBINSON, BEVERLY BRADLEY
Address: PO BOX 1436
City-St-Zip: QUINCY, FL 32353 AM

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AUDREY LEWIS-POTTER

D

03/31/2009

Electronic Signature of Signing Officer or Director

Date