

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jul 09, 2000 08:00 AM  
Secretary of State

DOCUMENT # **N40463**

1. Entity Name

THE ALTERNATIVE SOUTH, INC.

Principal Place of Business

7045 NORTH CASTLEBERRY ROAD

HERNANDO

34442

FL

US

Mailing Address

7045 NORTH CASTLEBERRY ROAD

HERNANDO

34442

US

FL

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

**59-3139131**

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

7. Name and Address of New Registered Agent

MOYER, PATRICIA J.  
7290 N. SPRING RUN TER.

HERNANDO

34442

US

FL

Name

MOYER, PATRICIA J.

Street Address (P.O. Box Number is Not Acceptable)

7045 N. CASTLEBERRY ROAD

City

HERNANDO

**FL**

Zip Code

34442

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 **PATRICIA J. MOYER**

**07/09/2000**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

**FILE NOW:  
FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

VD ☐ Delete  
STRICKROOT FRED  
4603 TARAY LANE  
HOLIDAY FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

SD ☐ Delete  
ZYLKA, BROOKE  
4603 TARAY LANE  
HOLIDAY FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

PTD ☐ Delete  
MOYER, PATRICIA J  
7290 N. SPRING RUN TERR.  
HERNANDO FL 34442

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

PTD ☒ Change ☐ Addition  
MOYER, PATRICIA J  
7045 N. CASTLEBERRY RD.  
HERNANDO FL 34442

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.