

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000073516

FILED
Mar 05, 2002 8:00 AM
Secretary of State

Entity Name: ALPHA RESIDENTIAL MARKETING INC.

Current Principal Place of Business:

1101 NORTH CONGRESS AVE
SUITE 201
BOYNTON BCH, FL 33426

New Principal Place of Business:

5871 TRIPHAMMER RD
LAKE WORTH, FL 33463

Current Mailing Address:

1101 NORTH CONGRESS AVE
SUITE 201
BOYNTON BCH, FL 33426

New Mailing Address:

5871 TRIPHAMMER RD
LAKE WORTH, FL 33463

FEI Number: 65-1124530

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAULIN, DUCKENS M
1101 NORTH CONGRESS AVENUE
SUITE 201
BOYNTON BEACH, FL 33426

Name and Address of New Registered Agent:

PAULIN, DUCKENS M
5871 TRIPHAMMER RD
LAKE WORTH, FL 33463

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: DUCKENS M. PAULIN

03/05/2002

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: PT () Delete
Name: PAULIN, DUCKENS M
Address: 1101 NORTH CONGRESS AVENUE
City-St-Zip: BOYNTON BEACH, FL 33426

Title: VS (X) Delete
Name: WATSON, MICHAEL A
Address: 1101 NORTH CONGRESS AVENUE
City-St-Zip: BOYNTON BEACH, FL 33426 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PAULIN, DUCKENS M
Address: 5871 TRIPHAMMER RD
City-St-Zip: LAKE WORTH, FL 33463

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

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: DUCKENS M PAULIN

P

03/05/2002

Electronic Signature of Signing Officer or Director

Date