

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91200 046 ***150.00

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DOCUMENT # P96000016541

1. Entity Name
ALEXUS CORPORATION



Principal Place of Business
1111 LAKESHORE DRIVE
A-5
EUSTIS FL 32726
US

Mailing Address
P.O. BOX 1069
TAVARES FL 32776-1069
US



2. Principal Place of Business

3. Mailing Address

1111 LAKESHORE DRIVE

Suite, Apt. #, etc. OK

Suite, Apt. #, etc. A-5

City & State

EUSTIS, FLORIDA, USA

4. FEI Number 59-3364959

Applied For
Not Applicable

Zip

Country

Zip

Country

32726

LAKE

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAZELTON, ROGER Y.
1111 LAKESHORE DRIVE
A-5
EUSTIS FL 32726

Name

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

SAME

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Roger Y. Hazelton* - PRESIDENT

(NOTE: Registered Agent signature required when reinstating)

DATE

4/17/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P D HAZELTON, ROGER Y 1111 LAKESHORE DR A-5 EUSTIS FL 32776	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 607, 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.

SIGNATURE

Roger Y. Hazelton PRESIDENT

Date

Daytime Phone #

4/17/03 352 589 6366

CR2E034 (10/02)