

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000017730

1. Entity Name

THE CABLE ALTERNATIVE 2001, INC.

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90090 011 ***150.00

Principal Place of Business

Mailing Address

7320 47TH STREET
PINELLAS PARK FL 33781
US

7320 47TH STREET
PINELLAS PARK FL 33781-4415
US

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

59-3358587

Applied For

Not Applicable

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

GAGNE, CAROLE
7320 47TH STREET
PINELLAS PARK FL 33781

Name

J M WINEBRENNER

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

3773 CENTRAL AVE

City ST PETERSBURG

FL

Zip Code
33713

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

[Signature]

J M WINEBRENNER

3/2/00

DATE

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

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Delete
NAME GAGNE, CAROLE
STREET ADDRESS 7320 47TH STREET
CITY-ST-ZIP PINELLAS PARK FL 33781

TITLE P ☐ Change ☒ Addition
NAME DONALD R MORELOCK
STREET ADDRESS 9380 - 118th TERRACE NORTH
CITY-ST-ZIP LARGO FL 33773

TITLE VP ☒ Delete
NAME KING, DANIEL
STREET ADDRESS 7320 47TH ST.
CITY-ST-ZIP PINELLAS PARK FL 33781

TITLE S ☐ Change ☒ Addition
NAME ELLA JEAN MORELOCK
STREET ADDRESS 10401 SUNG HARBOR RD #68
CITY-ST-ZIP ST PETERSBURG FL 33702

TITLE S ☒ Delete
NAME KNIGHT, RUSSELL
STREET ADDRESS 3201 S. DALE MABRY
CITY-ST-ZIP TAMPA FL 33629

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DONALD R MORELOCK

3/2/00

727/544-6904

Date

Daytime Phone #