

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000080479

FILED  
Jan 18, 2002 8:00 AM  
Secretary of State

Entity Name: ALTERNATIVE ACCOUNTING, INC.

## Current Principal Place of Business:

4523 WEST KENNEDY BLVD.  
TAMPA, FL 33609

## New Principal Place of Business:

13902 N DALE MABRY HWY  
149  
TAMPA, FL 33618

## Current Mailing Address:

4523 WEST KENNEDY BLVD.  
TAMPA, FL 33609

## New Mailing Address:

13902 N DALE MABRY HWY  
149  
TAMPA, FL 33618

FEI Number: 59-3403322

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DUARTE, ANTONIO III  
11959 N FLORIDA AVE  
TAMPA, FL 33612 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

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: PST ( ) Delete  
Name: GRANAGHAN, PATRICK T  
Address: 4253 WEST KENNEDY BLVD.  
City-St-Zip: TAMPA, FL 33609

Title: VP (X) Delete  
Name: GRANAGHAN, FRANCES M  
Address: 4253 WEST KENNEDY BLVD.  
City-St-Zip: TAMPA, FL 33609

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: GRANAGHAN, PATRICK T  
Address: 13902 N DALE MABRY HWY  
City-St-Zip: TAMPA, FL 33618

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: PATRICK T. GRANAGHAN

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01/18/2002

Electronic Signature of Signing Officer or Director

Date