

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000096989

1. Entity Name

ALEXANDER'S POWER CENTER, INC.

FILED
May 03, 2000 8:00 am
Secretary of State

05-03-2000 90086 045 ***150.00

Principal Place of Business

Mailing Address

2012 B1 WHITFIELD AVENUE
SARASOTA FL 34243

2012 B1 WHITFIELD AVENUE
SARASOTA FL 34243

2. Principal Place of Business

1901 WHITFIELD AVENUE

3. Mailing Address

1901 WHITFIELD AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SARASOTA FL

City & State

SARASOTA FL

4. FEI Number

65-0793838

Applied For

Not Applicable

Zip

34243

Country

Zip

34243

Country

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

TILBURN, LANCE
2012 B1 WHITFIELD AVENUE
SARASOTA FL 34243

Name

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

1901 WHITFIELD AVENUE

City

SARASOTA

FL

Zip Code

34243

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

(NOTE: Registered Agent signature required when reinstating)

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 ☐ Delete
NAME P
STREET ADDRESS TILBURN, LANCE
CITY-ST-ZIP 2012 B1 WHITFIELD AVENUE
SARASOTA FL 34243

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1901 WHITFIELD AVENUE
CITY-ST-ZIP SARASOTA FL 34243

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
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CITY-ST-ZIP

TITLE ☐ Delete
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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:

Lance Tilburn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)