

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 09, 2000 8:00 am**  
**Secretary of State**

05-09-2000 90072 003 \*\*\*150.00

**DOCUMENT # P98000086672**

1. Entity Name

**ALPINE SERVICES INC.**

Principal Place of Business

**10950 S.E. 131ST LANE  
 OCKLAWAHA FL 32179**

Mailing Address

**P O BOX 4173  
 BELLEVIEW FL 34421-4173**

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 **59-3541524**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BIRTH, NORMA JEAN  
 10950 S.E. 131ST LANE  
 OCKLAWAHA FL 32179**

7. Name and Address of New Registered Agent

Name: **George Birth Jr**  
 Street Address (P.O. Box Number is Not Acceptable): **10950 SE 131 LANE**  
 City: **OCKLAWAHA** FL Zip Code: **32179**

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: *George Birth Jr* **GEORGE BIRTH JR V.P.** **4/26/00**  
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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
PST	BIRTH, NORMA JEAN		
10950 S.E. 131ST LANE	10950 S.E. 131ST LANE		
OCKLAWAHA FL 32179	OCKLAWAHA FL 32179		
VP	BIRTH, GEORGE R		
10950 S.E. 131ST LANE	10950 S.E. 131ST LANE		
OCKLAWAHA FL 32179	OCKLAWAHA FL 32179		

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: *George Birth Jr* **GEORGE BIRTH JR** **1/31/00** **352-288-6846**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR21 (1-0-00)