FILED
May 13, 2003 8:00 am
Secretary of State

05-13-2003 90049 020 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000090398

90133580

1. Entity Name
ALC INVESTMENTS, INC.

Principal Place of Business	Mailing Address
410 SUNRISE DRIVE FORT PIERCE, FL 34945	410 SUNRISE DRIVE FORT PIERCE, FL 34945

2. Principal Place of Business	3. Mailing Address
21317 124th Pl	21317 124th Pl
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Live Oak, Fl	City & State: Live Oak, Fl
Zip: 32060 Country: USA	Zip: 32060 Country: USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: 65-0871244 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CROUCH, JAY
410 SUNRISE DRIVE
FORT PIERCE, FL 34945

7. Name and Address of New Registered Agent

Name: Crouch, Jay
Street Address (P.O. Box Number Is Not Acceptable): 21317 124th Pl
City: Live Oak, FL Zip Code: 32060

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: [signature] Jay Crouch 3-30-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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	PD CROUCH, CAROL 410 SUNRISE DRIVE FORT PIERCE, FL 34945	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Sec-Treasure Jay Crouch 21317 124th Pl Live Oak, Fl 32060	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Crouch, Carol 21317 124th Pl Live Oak, Fl 32060	☑ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: Carol Crouch CAROl CROUCH 3-30-03 386-658-1230
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)