

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000057031

FILED  
Mar 22, 2008  
Secretary of State

**Entity Name:** ALTERNATIVE TRANSPORTATION SERVICES, INC.

**Current Principal Place of Business:**

518 MASSACHUSETTS  
HERNANDO, FL 34442

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 4615  
HOMOSASSA, FL 34447

**New Mailing Address:**

**FEI Number:** 59-3581551

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FOX, ARTHUR  
518 MASSACHUSETTS  
HERNANDO, FL 34442 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FOX, ARTHUR  
Address: 518 MASSACHUSETTS  
City-St-Zip: HERNANDO, FL 34442

Title: ST ( ) Delete  
Name: FOX, ARTHUR  
Address: 518 MASSACHUSETTS  
City-St-Zip: HERNANDO, FL 34442

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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:** ARTHUR FOX

PRES

03/22/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date