FILED

2002 UNIFORM BUSINESS REPORT (UBR)

2002 UNIFORM BUSINESS REPORT (UBR)							Feb 26, 2002 8:00 am Secretary of State 02-26-2002 90082 024 ***150.00				
DOCUMENT # P9900072057 1. Entity Name ALPINE VENTURE CAPITAL CORP.											
Principal Place of Business ONE NORTH CLEMATIS STEET SUITE 510 W. PALM BEACH FL 33401			Mailing Address ONE NORTH CLEMATIS STEET SUITE 510 W. PALM BEACH FL 33401				1 11 11 11 11 11 11 11 11 11 11 11 11 1	18118 18111 18 111 88111 8		17 ANNO 1888 Y a a	
2. Principal	Place of Business		3. Mailing Address				} 	. 8758 18111 85141 88141 9	Q	}	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & Star	e e		City & State			4	4. FEI Number 65-0052524-65-095 Applied For Not Applicable				
Zip Country			Zip Country				5. Certificate of Sta		\$8.75 Ac	Iditional	
	6. Name and Addre	gistered Agent				7. Name and Address of New Registered Agent					
S. Walls and Addison of Gallon Hogisteria Agent					Name Name						
INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVE., STE. 3000			TION	Street Address (F). Box Number is N	lot Acceptable)			
MIAMI FL 33131								•			
					City				FL Zip Coo	de	
C The shows	named entity submits the	nin atatamant for th	ne purpose of changing its r								
o. The above	maned entity soonits tr	ns statement for tr	e purpose of changing its r	egistere	ea onice o	rregistered	agent, or both, in t	ne state of Florida	1.		
SIGNATURE	Signature, typed or printed name	e of registered agent and	title if applicable. (NOTE:	Registere	d Agent signat	ure required whe	en reinstating)		DATE		
n This corp.	eration in aliable to eatin	fu ita Intonsible			-				<u> </u>		
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, 2002 Fee will be \$550.00 Make Check Payable to Department of Star			550.00		Campaign Financ nd Gontribution.		OMay Be d to Fees	
11.	C	FFICERS AND DI	RECTORS	12.			ADDITIONS/CHAI	NGES TO OFFICE	RS AND DIRECTOR	RS IN 11	
TITLE	DP		☐ Delete	TITLE					Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	Warner, Stephen 515 N Flagler DF West Palm Beach	R #1200		•	E et address -st-zip		lends stre			}	
TITLE	DVP	1112 00401	☐ Delete	╂—				3401	576	- Addition	
NAME	EICHENBERGER, PI	ENE P	☐ Delete	TITLE			lematis 5		Change	Addition	
STREET ADDRESS 515 N. FLAGLER DR				ET ADDRESS	W.P.B, FL. 33401			ĺ			
CITY-ST-ZIP	WEST PALM BEACI	H FL 33401		CITY	-ST-ZIP		, ,				
TITLE	VP	CE I	☐ Delete	TITLE		1 10.0	Jematis	St, #51	Change	☐ Addition	
NAME STREET ADDRESS	SHEWMAKER, BRU 515 N FLAGLER DF			NAME	ET ADDRESS	W.P.	B.,FL	33401			
CITY-ST-ZIP	WEST PALM BEACH				-ST-ZIP] -					
TITLE	DVP	_ 	□ Delete	TITLE	:	1 10.0	clemati=	s 5+, #9	510 Change	Addition	
NAME	POWELL, H. HICKM			NAME			Palm Bea			_	
STREET ADDRESS	515 N. FLAGLER DI West Palm Beach				ET ADDRESS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,-2,,,	',' -	3101		
CITY-ST-ZIP	ST ST	111 30401	Delete	╂	ST-ZIP				[7] Ob-		
TITLE NAME	DONOHUE, DENNIS	S E	Delete	TITLE NAME					Change	☐ Addition	
STREET ADDRESS	515 N. FLAGLER	DR			Et address					1	
CITY-ST-ZIP	WEST PALM BEACH	H FL 33401		CITY-	ST-ZIP			_ -			
TITLE	ST FC	<u>.</u> .	☐ Delete	TITLE					☐ Change	Addition	
NAME STREET ADDRESS	Rita F. DOT	Clemati	s St, #510	NAME	T ADDRESS	<u> </u>			حر	۸	
CITY-ST-ZIP West Palm Beach, FL 33401					ST-ZIP						
	L					<u> </u>					

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:

PROUBED SIGNATURE AND TREED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #