

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2001 8:00 am
Secretary of State

07-25-2001 90005 048 ***155.00

DOCUMENT # P99000085038

1. Entity Name
ALJO INC.

Principal Place of Business
100 WOODLAKE CIRCLE
NAPLES FL 34114

Mailing Address
100 WOODLAKE CIRCLE
NAPLES FL 34114



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0959547**

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SYNDER, LINDA
100 WOODLAKE CIRCLE
NAPLES FL 34114

Name

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

City

FL

Zip Code

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

Sue Chamberlain (Sue Chamberlain)

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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

TITLE **P** ☐ Delete
NAME **BOTTINO, ANGELA**
STREET ADDRESS **39 CHUCK BLVD**
CITY - ST - ZIP **NORTH BABYLON NY 11703**

TITLE **VP** ☒ Delete
NAME **LENAGHAN, NICOLE**
STREET ADDRESS **39 CHUCK BLVD**
CITY - ST - ZIP **NORTH BABYLON NY 11703**

TITLE **ST** ☒ Delete
NAME **BOTTINO, NICHOLAS**
STREET ADDRESS **39 CHUCK BLVD**
CITY - ST - ZIP **NORTH BABYLON NY 11703**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE **NICHOLAS BOTTINO VP** ☐ Change ☒ Addition
NAME
STREET ADDRESS **39 CHUCK BLVD.**
CITY - ST - ZIP **N. BABYLON N.Y. 11703**

TITLE **ST** ☐ Change ☒ Addition
NAME **NANCY BOTTINO**
STREET ADDRESS **39 CHUCK BLVD.**
CITY - ST - ZIP **N. BABYLON NY 11703**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
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:

Nancy Bottino - ST
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/18/01
 Date

631-2542009
 Daytime Phone #

CR2E034 (5/01)