


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90299 001 ***150.00

DOCUMENT # 493767 1. Entity Name CORPORATION INFORMATION SERVICES, INC.	
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Principal Place of Business 1201 HAYS STREET P O BOX 5828 TALLAHASSEE, FL 32301	Mailing Address 2711 CENTERVILLE ROAD SUITE 400 WILMINGTON, DE 19808
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50042233



03212005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1654259	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

PIZZUTO, PATRICIA 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301-2525

Please Delete

**DO NOT WRITE
IN THIS SPACE**

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, 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, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WINN, BRUCE R 2711 CENTERVILLE ROAD, STE. 400 WILMINGTON, DE 19808
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VCFO FORTUNATO, JOHN 2711 CENTERVILLE ROAD, STE. 400 WILMINGTON, DE 19808
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS MASSI, GEORGE A 2711 CENTERVILLE ROAD, STE. 400 WILMINGTON, DE 19808
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP ROSSER, MARK A 2711 CENTERVILLE ROAD, STE. 400 WILMINGTON, DE 19808
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP PARKER, DARLENE 2711 CENTERVILLE ROAD, STE. 400 WILMINGTON, DE 19808
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP KENTON, JENNIFER A 2711 CENTERVILLE ROAD, STE. 400 WILMINGTON, DE 19808

**DO NOT WRITE
IN THIS SPACE**

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:

John Fortunato
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-05
Date

3026365400
Daytime Phone #