## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

F93000002236 (8)

1. Corporation Name	3000002236 (8) IS & COMPANY, INCORPORATED	I IAATKAR IIIA KAND HIIIK OONII BANK BONII AAND AAND AAND HARA WAAD IIIIR ONII IOAI
Principal Place of Business	Mailing Address	
1170 THIRD ST S C201 Naples Fl 33940	1170 THIRD ST S C201 NAPLES FL 33940	
US	U\$	3. Date Incorporated or Qualified 3a. Date of Last Report

	US			US				3.	Date Incorporated or Qualified 05/12/1993	3a. Date		st Report 1995	
2. !1	Principal Place of Bu	siness	2a 26	. Mailing Address			~ <del></del>	4.	FE! Number 41-1459808	J	-,00,	Applied For Not Applicable	
2	Suite, Apt. #, etc.		27	Suite, Apt. #, etc.				5.	Certificate of Status Desired			.75 Additional	
3	City & State		28	City & State				6.	Election Campaign Financing Trust Fund Contribution			5.00 May Be dded to Fees	
4	Zip	Country 25	29		Gour <b>30</b>	itry		8.	This corporation has liability for in Florida Statutes Yes	ntangible ta □No	k unde	ers 199.032,	_
	9. Na	me and Address of Cur	rent Regis	stered Agent		10. Name and Address of New Registered Agent							
GOLDSMITH, STEVEN M 1170 THIRD STREET SOUTH				$\perp$	Name Street Addres								
					Ī	84	City			<b>C</b> 1	85	Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, if am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. EVEL UT EVE

S:GNATURE .	-		· · · · · · · · · · · · · · · · · · ·	MUC.	
12.	Signature typed or printed name of registered agent and title if applicable (NOTE: F  OFFICERS AND DIRECTORS	Registered Agent signature 13.		ALIE EVENERATE	
TITLE NAME	PST DELETE GOLDSMITH, STEVEN M	1. 1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS CHATLMAN AND CHIEF CHANGES OFFICER	Channe	Addition
STREET ADDRESS	20 SEAGATE DRIVE, PENTHOUSE ONE NAPLES FL 33940	1.3 STREET ADDRESS	.0244	tenh uf	FILER AN
THE NAME	HELMS, JACK P	2. 1 TITLE 2.2 NAME	PRESIDENT AND CHIEF OPELA 4906 LATEVIEW DR.	Change	Addition
STREET ADORESS	HOPKINS AN SESAS EDINA, MN 55424	2.3 STHEET ADDRESS	EDINA, MN 55454	Se	che Fary
TITLE	DECETE	3 1 TITLE 32 NAME		Change	Addition
STREET ADDRESS		3 3. STREET ADDRESS			
City St - ZiF Title	DELETE	3 4 Crty - St - ZiP 4 1 Title		Change	Addition
NAME STHEET ADDRESS		4.2 NAME 4.3 STREET ADDRESS			
CITY-S1-ZIP TITLE	☐ DÉLÉTE	4.4 CITY - ST - ZIF 5. 1 TITLE		☐ Change	Add-tion
NAME STHEET ADDRESS		5.2 NAME 5.3 STREET ADDRESS			
CHY · ST · ZIF	☐ DELETE	54 CHY+ST-ZIP 6 1 TITLE		Change	☐ Addition
NAME STREET ADDRESS		62 NAME			
CITY-S1-ZIP	y certify that the information supplied with this filling is voluntarily furnished	6.3 STHEET ADDRESS 6.4 City-St-Zip			

recomposed in the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual phort or supplemental annual 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 corner shown or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if chapter in an attachment with an address.

SIGNATURE: (

There P. Heuns 4:15-96 941-263-1199