

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 19 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F96000004742 (0)**

1. Corporation Name

FLORIDA'S INTERNET PROVIDING SERVICES, INC.



Principal Place of Business

Mailing Address

%DAVID J MAHONEY III
13453 DOUBLETREE TR
WELLINGTON FL 33414

%DAVID J MAHONEY III
13453 DOUBLETREE TR
WELLINGTON FL 33414-4014

3. Date Incorporated or Qualified
09/13/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 **Florida's Internet Providing Services Inc**
Suite, Apt. #, etc.

26 **Florida's Internet Providing Services Inc**
Suite, Apt. #, etc.

22 **507 Royal Palm Beach Blvd**
City & State

27 **507 Royal Palm Beach Blvd**
City & State

23 **Royal Palm Beach, FL**
Zip

28 **Royal Palm Beach, FL**
Zip

24 **33411**
Country

29 **33411**
Country

4. FEI Number

65-0690640

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

MAHONEY, DAVID J III
13453 DOUBLETREE TR
WELLINGTON FL 33414

10. Name and Address of New Registered Agent

81 Name **Raymond S. Leventhal, President**
82 Street Address (P.O. Box Number is Not Acceptable)
Florida's Internet Providing Services, Inc
83 **507 Royal Palm Beach Blvd**
84 City **Royal Palm Beach** FL 85 Zip Code **33411**

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Raymond S. Leventhal, President

Raymond S. Leventhal 1/7/97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DCV	<input type="checkbox"/> DELETE
NAME	MAHONEY, DAVID J III	
STREET ADDRESS	13453 DOUBLETREE TR	
CITY-ST-ZIP	WELLINGTON FL 33414	
TITLE	DCP	<input type="checkbox"/> DELETE
NAME	LEVENTHAL, RAYMOND S	
STREET ADDRESS	12 BLACK OAK TR	
CITY-ST-ZIP	VERNON NJ 07462	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	LEVENTHAL, SHARON J	
STREET ADDRESS	12 BLACK OAK TR	
CITY-ST-ZIP	VERNON NJ 07462	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	DP Leventhal, Raymond S.
2.3 STREET ADDRESS	14152 Greentree Dr.
2.4 CITY-ST-ZIP	Wellington FL 33414
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	ST Leventhal, Sharon J
3.3 STREET ADDRESS	14152 Greentree Dr.
3.4 CITY-ST-ZIP	Wellington FL 33414
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Raymond S. Leventhal** **Raymond S. Leventhal 1/7/97** (SBI) **792 0005**

CR2E034 (9/96)