

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002444

FILED
Apr 24, 2006
Secretary of State

Entity Name: INNOVATIVE SOLUTIONS OF PONTE VEDRA, INC.

Current Principal Place of Business:

2720 HARBOR CT
SAINT AUGUSTINE, FL 32084 US

New Principal Place of Business:

Current Mailing Address:

2720 HARBOR CT
SAINT AUGUSTINE, FL 32084 US

New Mailing Address:

FEI Number: 06-1535457

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEAL, BLAKE F III
50 NORTH A1A, STE 103
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVS () Delete
Name: FEATHERSTON, JOHN
Address: 2720 HARBOR CT
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: PD () Delete
Name: SHERRY, JAMES F
Address: 2720 HARBOR COURT
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: ST () Delete
Name: FEATHERSTON, PETER
Address: 2720 HARBOR COURT
City-St-Zip: SAINT AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES F SHERRY

PD

04/24/2006

Electronic Signature of Signing Officer or Director

Date