

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K29757

1. Entity Name
ISIS RISING, INC.

FILED
Feb 25, 2000 8:00 am
Secretary of State

02-25-2000 90020 039 ***150.00

Principal Place of Business
16015 SW FARM RD
INDIANTOWN FL 34956
US

Mailing Address
P.O. BOX 691867
ORLANDO FL 32869-1867
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0068126

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRADSHAW, TAYLOR
11214 SHER LN
ORLANDO FL 32836

Name ALISON U ROSE
Street Address (P.O. Box Number is Not Acceptable)
8628 VISTA LAKE LN.
1211
City ORLANDO, FL Zip Code 32821

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 *Alison U Rose*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

2/9/00

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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME PURSEL, JACH
STREET ADDRESS 12179 S APOPKA VINELAND RD, #136
CITY-ST-ZIP ORLANDO FL 32836 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME 12179 S. APOPKA VINELAND RD.
STREET ADDRESS 84B #134, ORLANDO, FL 32836
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE D
NAME NORTH, PENY
STREET ADDRESS 12179 S APOPKA VINELAND RD, #136
CITY-ST-ZIP ORLANDO FL 32836 ☐ Delete

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

TITLE D
NAME NORTH, MICHAELL
STREET ADDRESS 12179 S APOPKA VINELAND RD, #136
CITY-ST-ZIP ORLANDO FL 32836 ☐ Delete

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

TITLE D
NAME LANDERS, ZOE
STREET ADDRESS 12179 S APOPKA VINELAND RD, #136
CITY-ST-ZIP ORLANDO FL 32836 ☐ Delete

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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:

Alison U Rose
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-9-00 407-876-1876

CR2E034 (9/99)