

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00611

FILED
Mar 08, 2008
Secretary of State

Entity Name: ISM - FLORIDA GULF COAST, INC.

Current Principal Place of Business:

1814 BUNKER HILL DR
SUN CITY CENTER, FL 33573 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 17708
CLEARWATER, FL 33762 US

New Mailing Address:

FEI Number: 59-2434365 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FARNEY, SAM
1814 BUNKER HILL DR
SUN CITY CENTER, FL 33573 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STEVENS, KARL PRES
Address: 299 FIRST AVENUE NORTH
City-St-Zip: ST PETERSBURG, FL 33701 US

Title: VD () Delete
Name: KILBRIDE, MARY ELLEN VICE PR
Address: 11399 16TH COURT N. SUITE 200
City-St-Zip: ST PETERSBURG, FL 33716 US

Title: TD () Delete
Name: FARNEY, SAM TREAS
Address: 1814 BUNKER HILL DR.
City-St-Zip: SUN CITY CENTER, FL 33573 US

Title: S () Delete
Name: PRINE, JOANNE SECTY
Address: 1911 SOMMERSET PLACE
City-St-Zip: CLEARWATER, FL 33760 US

Title: D () Delete
Name: MILBURN, ROBERT DIR
Address: 1601 SOUTH FRONTAGE ROAD
City-St-Zip: PLANT CITY, FL 33563 US

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:

Title: S (X) Change () Addition
Name: MILBURN, ROBERT SECTY
Address: 1021 BROOKSTONE CT
City-St-Zip: RIVERVIEW, FL 33569 US

Title: D (X) Change () Addition
Name: MILBURN, ROBERT DIR
Address: 1021 BROOKSTONE CT
City-St-Zip: RIVERVIEW, FL 33569 US

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMUEL D. FARNEY

TREA

03/08/2008

Electronic Signature of Signing Officer or Director

Date