2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2005
Secretary of State

DOCUMENT# N03000000143

Entity Name: INTERNATIONAL SOCIETY OF TECHNICAL AND ENVIRONMENTAL PROFESSIONALS, INC.

Current Principal Place of Business:

400 N. TAMPA STREET
SUITE 2300
TAMPA, FL 33602

New Principal Place of Business:

1608 METROPOLITAN CIRCLE
SUITE B
TALLAHASSEE, FL 32308

Current Mailing Address:

400 N. TAMPA STREET
SUITE 2300
TAMPA, FL 33602

New Mailing Address:

POST OFFICE BOX 38070
TALLAHASSEE, FL 32315

FEI Number: 20-1413182 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, EUGENE B
1608 METROPOLITAN CIRCLE
SUITE B
TALLAHASSEE, FL 32303 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:	TD	( ) Delete
Name:	STEPHENS, ROBERT	
Address:	14409 N. NEBRASKA AVE., SUITE A	
City-St-Zip:	TAMPA, FL 33613	
Title:	SD	( ) Delete
Name:	MCCAIN, CARTER	
Address:	POST OFFICE BOX 1531	
City-St-Zip:	TAMPA, FL 33601	
Title:	D	( ) Delete
Name:	JONES, EUGENE	
Address:	1608 METROPOLITAN CIRCLE, SUITE B	
City-St-Zip:	TALLAHASSEE, FL 32303	

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 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 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: EUGENE B. JONES D 01/17/2005

Electronic Signature of Signing Officer or Director — Date