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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT #

1. Corporation Name N27738

(6)

INSTITUTE OF MAPPING SCIENCES, INC.											
Principal Place o	of Business		Mailing Add	dress	<u> </u>						10 (1 T) T)
18221 COUNTY			18221 CO	UNTY ROAD 2	25						
P.O. BOX 347		P.O. BOX	P.O. BOX 347								
EVINSTON FL 32633 US			US	EVINSTON FL 32633 US				3. Date Incorporated or Qualified	3a.	Date of Last f 03/23/19	
								08/03/1988 4. FEI Number			applied For
. Principal Plad	ce of Business		2a. Mailing	Address				59-2910683		⊢ —+	ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired		+	Additional
Conto, 7 pt. 17, oto.			27	⊢ 1				5. Certificate of Status Desired			Required
City & State			City & S	State				6. Election Campaign Financing			May Be to Fees
			28		Cour	ates :		Trust Fund Contribution 8. This corporation has liability for			
Zip I	⊢-¬	Country	Ζφ 29		30	шу		Florida Statutes	yr ir tarigiole Yes	No No	199.002,
	o Name and	Address of Curren		gent	[30]			10. Name and Address of New	Registere	d Agent	
	5. Name and			Y		81	Name				
CIRCON DAVID W							Stroot Add	ress (P.O. Box Number is Not Accep	(P.O. Box Number is Not Acceptable)		
GIBSON, DAVID W. 18221 COUNTY RD. 225							OFFICE ACT	Control of the contro			
P.O. BOX		· -				63					
	N FL 32633				}	84	City			85 Zip	Code
]	•	ration submits this statement for the		L	
2.	organia de la companya de la company	ted name of registered ager OFFICERS AN			13.			ADDITIONS/CHANGES TO C	DEELCERS A	NO DIRECTO	DRS IN 12
				E TOELETE		T E		70. THOROGOV TO S	77102.10		☐ Addition
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IAME TREET ADORESS	GIBSON, DA	OAD 225, BOX 34		DELETE	1.1 TH 1.2 NA 1 3 ST	AME		70.111010		☐ Change	Addition
IAME STREET ADORESS CITY - ST - ZIP	GIBSON, DA	OAD 225, BOX 34	47	DELETE	1.1 TH 1.2 NA 1 3 ST	AME IREET A					Addition
IAME STREET ADDRESS SITY - ST - ZIP STLE	GIBSON, DA COUNTY RO EVINSTON I D GIBSON, BE	dad 225, BOX 34 Fl Etty J.	47		1,1 Til 1,2 NA 13 ST 1,4 Ci	AME FREET A HTY-ST DLF				☐ Change	Addition
TAME TREET ADORESS TITY - ST - ZIP TITLE TAME	GIBSON, DA COUNTY RO EVINSTON I D GIBSON, BE COUNTY RO	DAD 225, BOX 34 FL ETTY J. DAD 225, BOX 34	47		1.1 TH 1.2 NA 13 ST 1.4 CF 2.1 TF 2.2 NA 2.3 SF	AME TREET A HTY-ST TLE AME TREET A	-ZIP ADDRESS			☐ Change	Addition
IAME STREET ADDRESS SITY - ST - ZIP STREET SAME STREET ADDRESS STREET ADDRESS	GIBSON, DA COUNTY RO EVINSTON I D GIBSON, BB COUNTY RO EVINSTON	DAD 225, BOX 34 FL ETTY J. DAD 225, BOX 34	47	DELETE	1.1 TH 1.2 NA 13 ST 1.4 CI 2.1 TH 2.2 NA 2.3 ST 2.4 C	AME IREET A ITY-ST ILE AME TREET A	-ZIP ADDRESS			☐ Change	☐ Addition
IAME STREET ADDRESS STITY - ST - ZIP STREET ADDRESS STREET ADDRESS STY - ST - ZIP STILE	GIBSON, DA COUNTY RO EVINSTON I D GIBSON, BE COUNTY RO EVINSTON	DAD 225, BOX 34 FL ETTY J. DAD 225, BOX 34 FL	47		1.1 Til 1.2 NA 13 ST 1.4 CI 2 1 Ti 2 2 NA 2 3 ST 2 4 C 3 1 Ti	AME TREET A TY-ST TLE AME TREET A TREET A	-ZIP ADDRESS			☐ Change	☐ Addition
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NAME STREET ADDRESS SITY - S1 - ZIP VAME STREET ADDRESS CITY - ST - ZIP UTLE VAME STREET ADDRESS STREET ADDRESS	GIBSON, DA COUNTY RO EVINSTON I GIBSON, BE COUNTY RO EVINSTON D WHITEBREA COUNTY RO	DAD 225, BOX 34 FL ETTY J. DAD 225, BOX 34 FL AD, VERONICA L. OAD 225	47	DELETE	1.1 Til 12 NA 13 ST 1.4 Ci 21 Til 22 NA 23 SI 2 4 C 31 Til 32 NA 3.3 Si	AME IREET A ITY-ST ILE AME TREET A ITY-ST ITUE AME TREET A	-ZIP ADDRESS - ZIP ADDRESS		••	☐ Change	Addition
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR